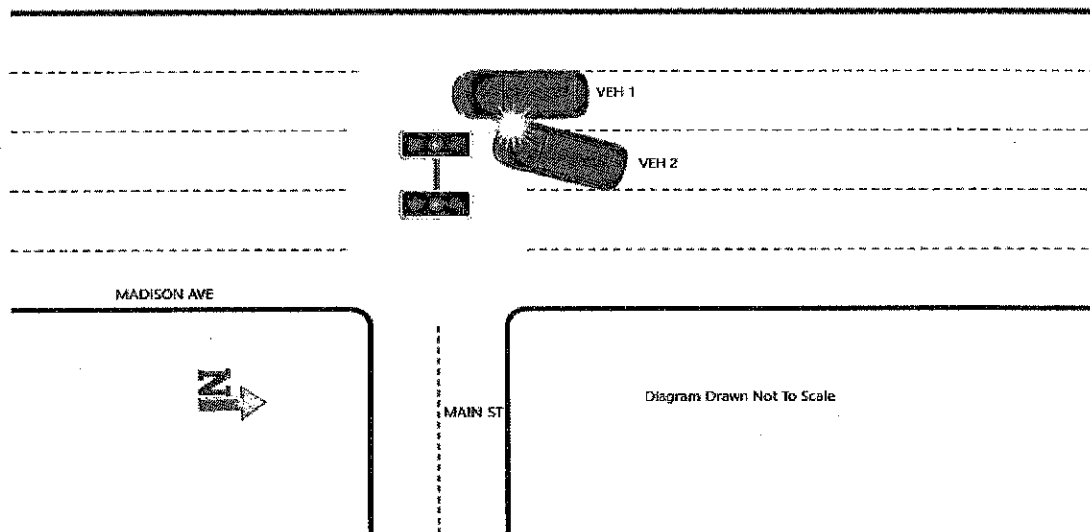


New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**
Station: **--** Case No: **22-022464**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEH 1 STATED SHE WAS TRAVELING SOUTH ON MADISON AVENUE IN THE INSIDE LANE OF TRAFFIC. SHE SAID WHEN SHE WAS TRAVELING STRAIGHT, VEH 2 THAT WAS WAITING TO MAKE A LEFT TURN ON TO MAIN STREET IN THE LEFT TURN LANE, CAME INTO HER LANE CUTTING HER OFF AND HITTING HER CAR.

DRIVER OF VEH 2 STATED SHE WAS TRAVELING SOUTH ON MADISON AVENUE, AND WAS WAITING IN THE LEFT TURN LANE AT THE TRAFFIC LIGHT TO MAKE A LEFT TURN ON TO MAIN STREET. DRIVER 2 SAID SHE CHANGED HER MIND AND DID NOT WANT TO MAKE THE LEFT TURN ANYMORE. DRIVER 2 SAID SHE THOUGHT SHE WAS CLEAR AND MERGED INTO THE RIGHT LANE AND HIT VEH 1.

UPON MY INVESTIGATION I DETERMINED DRIVER 2 AT FAULT FOR THE CRASH.

146 Officer's Signature

CLARKE N

147 Badge #

334

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending ☒ Complete

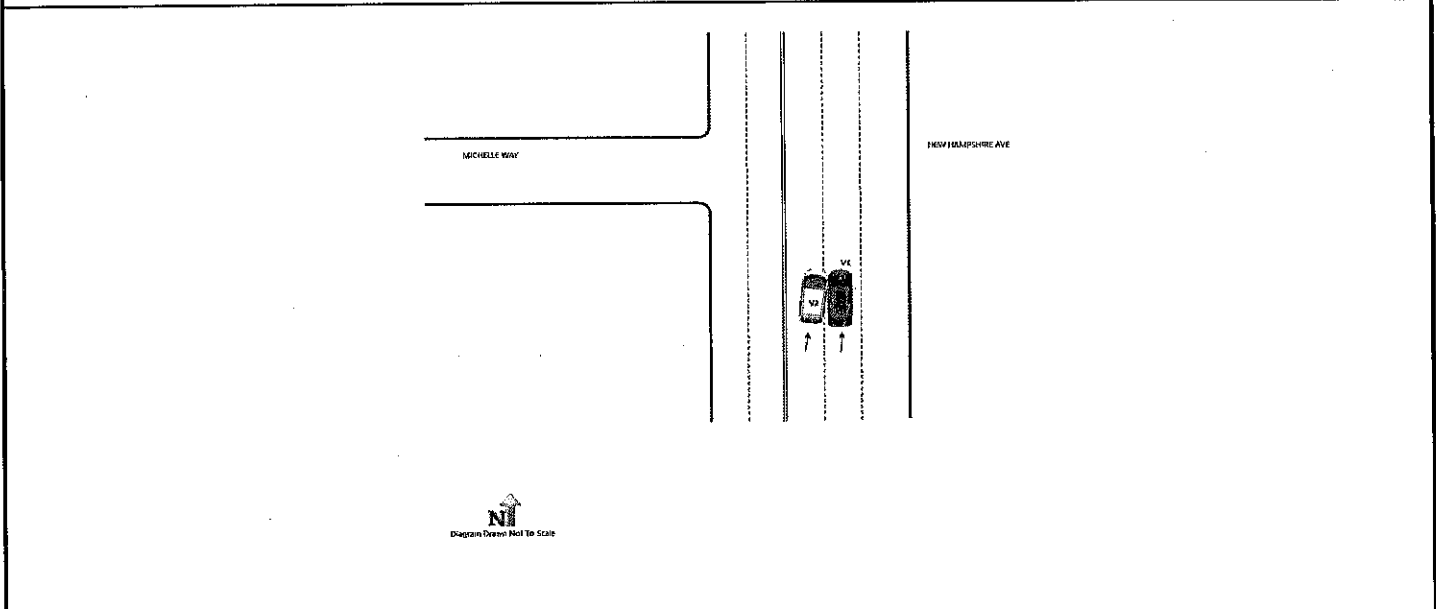
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-022238**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

141 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1, Samuel Lissauer was operating a 2020 Hyundai Elantra, NJ N64-LUT. Mr. Lissauer stated he was traveling north on New Hampshire Avenue in the right lane approaching Michelle Way when a vehicle in the left lane changed lanes into his lane and struck the front driver side of his vehicle.

Driver 2, Patrick Sample was operating a 2021 Mazda CX3, NJ S61-MXW. Mr. Sample stated he was traveling north on New Hampshire Avenue in the left lane approaching Michelle Way when a vehicle in front of him stopped to make a left turn onto Michelle Way. He went around the passenger side of that vehicle and while doing so the passenger side of his vehicle was struck by vehicle 1 which was traveling north on New Hampshire Avenue in the right lane. End of report.

146 Officer's Signature

PEDERSON JON

147 Badge #

305

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☐ Reportable ☒ Non-Reportable ☐ Change Report	
05	1 Case Number		10 Crash Occurred On: E 7TH ST		11 Speed Limit 35	
97	22-022179				25	
01	2 Police Dept of		At Intersection With Road Name Dir		12 Route No. Suffix 13 Milepost	
98	LAKEWOOD TOWNSHIP F		75		25	
01	3 Station/Precinct		14 15 16		17 Cross Road Name	
99					18 Speed Limit	
07	4 Date of Crash		5 Day Of Week		19 To 20 Route/Name	
100a	03/23/22		WEDNESDAY		21 Latitude 40.09816 22 Longitude -74.19147	
01	0828		1514			
100b	23 Veh #		24 Policy No.		25 NJ Ins. Code	
04	1		SELF INSURED		53 Veh #	
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hlt & Run				54 Policy No. 939775080	
02	26 Driver's First Name		29 Sex		55 NJ Ins. Code	
102	SHLOMO		M		054	
01	27 Number & Street		56 Driver's First Name		59 Sex	
103	8 8TH ST		MORDECHAI		M	
01	28 City		57 Number & Street			
104	LAKEWOOD		1312 VENTURA DR			
2	30 Eyes		58 City			
	2		LAKEWOOD			
	DL Class		59 State			
	D		NJ			
	Restrictions		60 Eyes			
			2			
	Endorsements		DL Class			
			D			
	31 State		Restrictions			
	IS					
105	32 Driver's License Number		62 Driver's License Number			
07	021899646		U54665638208942			
	33 DOB		63 DOB			
	05/11/1986		08/27/1994			
	34 Expires		64 Expires			
	05 31		08 22			
106	35 Owner's First Name		65 Owner's First Name			
-	THE HERTZ CORPO-		REBECCA			
107	36 Number & Street		66 Number & Street			
-	PO BOX 24130		1312 VENTURA DR			
108	37 City		67 City			
01	OKLAHOMA CITY		LAKEWOOD			
109	38 Make		68 Make			
01	TOYT		TOYT			
	39 Model		69 Model			
	CAM		RAV			
	40 Color		70 Color			
	GRY		BLK			
	41 Year		71 Year			
	2018		2017			
	42 Plate No.		72 Plate No.			
	20BLDP		W65HTJ			
	43 State		73 State			
	FL		NJ			
110	44 VIN		74 VIN			
01	4T1B11HK8JU676610		2T3RFREV7HW578411			
111	46 Vehicle Removed To		76 Vehicle Removed To			
01	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded			
112	☐ Left At Scene ☐ Towed Impounded		☐ Left At Scene ☐ Towed Impounded			
113	47 Authority		77 Authority			
-	☐ Owner ☒ Driver ☐ Police		☐ Owner ☒ Driver ☐ Police			
114	48 Alcohol/Drug Test		78 Alcohol/Drug Test			
-	Given: ☒ No ☐ Yes ☐ Refused		Given: ☒ No ☐ Yes ☐ Refused			
115	Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine			
-	Results: 0. - % ☐ Pending		Results: 0. - % ☐ Pending			
116	50 Carrier No.		80 Carrier No.			
02	☐ USDOT ☒ None		☐ USDOT ☒ None			
117	☐ MC/MX		☐ MC/MX			
04	51 GVWR/GCWR		81 GVWR/GCWR			
	☐ Weight <= 10,000 lbs		☐ Weight <= 10,000 lbs			
	☐ Weight 10,001-26,000 lbs		☐ Weight 10,001-26,000 lbs			
	☐ Weight >= 26,001 lbs		☐ Weight >= 26,001 lbs			
	52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity			
	Number & Street		Number & Street			
	City		City			
	State		State			
	Zip		Zip			
	135 Damage To Other Property					
	☐ Yes (If Yes, describe) ☒ No					
	Oper. 136 Charge		Oper. 138 Charge			
	137 Summons. No.		139 Summons. No.			
	Oper. 140 Charge		Oper. 142 Charge			
	141 Summons. No.		143 Summons. No.			
	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death			
A	1 01 01 05 35 M - - - 11 04 - -		SHLOMO - YARHI			
B	2 01 01 05 27 M - - - 11 04 - -		MORDECHAI S ULLMAN			
C			1312 VENTURA DR LAKEWOOD NJ 08701			
D						

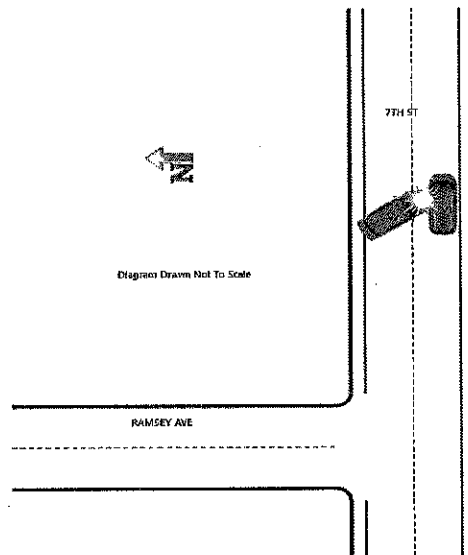
**New Jersey Police
Crash Investigation Report**

Police Dept: **LAKEWOOD TOWNSHIP** Code: _____Station: _____ Case No: **22-022179**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A L L F I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DUE TO A LANGUAGE BARRIER, THE STATEMENTS MADE BY THE DRIVER OV V1 WHERE TRANSLATED THROUGH A THIRD PARTY. DRIVER OF V1 STATED HE WAS TRAVELING EAST ON E 7TH ST, WHEN V2 WHO WAS MAKING A U-TURN FROM THE WESTBOUND LANE OF 7TH ST, STRUCK HIS VEHICLE.

DRIVER OF V2 STATED HE WAS PARKED ON THE WESTBOUND SIDE OF 7TH ST, ATTEMPTING A K-TURN. AS HE ATTEMPTED THE TURN, V1 SQUEEZED HIS WAY THROUGH, CAUSING THE COLLISION.

IN CONCLUSION I FIND THE DRIVER OF V2 TO BE AT FAULT.

V1 WAS SELF INSURED THROUGH THE HERZT CORPORATION, PO BOX 24130, OKLAHOMA CITY, OK 73134, PHONE # 405-775-3078

146 Officer's Signature

RENNA V

147 Badge #

341

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending☒ Complete

PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☐ Reportable		☒ Non-Reportable		☐ Change Report																																												
01	1 Case Number		22-021764										10 Crash Occurred On: STATE HWY 70		11 Speed Limit 50		0070		09																																											
01	2 Police Dept of		Code		LAKEWOOD TOWNSHIP 01										At Intersection With		Road Name		Dir		118b																																									
01	3 Station/Predinct				30										☒ Feet		☐ N ☐ E of: TOWBIN AVE		12 Route No.		Suffix		13 Milepost		18 Speed Limit																																					
02	4 Date of Crash		5 Day Of Week		03/21/22 MONDAY										6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		19		20 Route/Name		22 Longitude		21 Latitude																																	
01	mm dd yy														1341		1514		--		--		40.051730		-74.18755																																					
04	23 Veh #		24 Policy No.		953518440										25 NJ Ins. Code		53 Veh #		54 Policy No.		55 NJ Ins. Code		01																																							
01	1														134		2		918581337		134		01																																							
02	26 Driver's First Name		Initial		Last Name		29 Sex		EDUARDO J ASTURIASCASTELLA - M										56 Driver's First Name		Initial		Last Name		59 Sex		121a																																			
01	EDUARDO		J		ASTURIASCASTELLA -		M												HILARY		F		MURPHY		F		01																																			
01	27 Number & Street		55 VINCENT CT										57 Number & Street		352 SEAMAN AVE										121b																																					
01	28 City		State		Zip		LTL EGG HARBOR NJ 08087										58 City		State		Zip		BEACHWOOD NJ 08722																																							
02	30 Eyes		DL Class		Restrictions		Endorsements		31 State		2										4		D		-		NJ		07																																	
01	32 Driver's License Number		33 DOB		dd yyyy		34 Expires		yy		A80761927104992										62 Driver's License Number		63 DOB		mm dd yyyy		64 Expires		mm yy		08																															
01	A80761927104992		04/16/1999		04		25												M94003316653874		03/19/1987		03		24																																					
01	35 Owner's First Name		Initial		Last Name		36 Number & Street		37 City		State		Zip		EDUARDO J ASTURIASCASTELL -										65 Owner's First Name		Initial		Last Name		66 Number & Street		67 City		State		Zip		124																							
01	EDUARDO		J		ASTURIASCASTELL -		55 VINCENT CT		LTL EGG HARBOR		NJ		08087												HILARY		F		MURPHY		352 SEAMAN AVE		BEACHWOOD		NJ		08722		04																							
01	38 Make		39 Model		40 Color		41 Year		42 Plate No.		43 State		TOYT COR GRY 2009 D39PMH NJ										68 Make		69 Model		70 Color		71 Year		72 Plate No.		73 State		125																											
01	TOYT		COR		GRY		2009		D39PMH		NJ												SUBA		CRO		BLK		2021		U63PHC		NJ		26																											
01	44 VIN		JTDBL40E399078672										45 Expires		01 23										74 VIN		JF2GTAPCXMH653343										75 Expires		10 24										126													
01	46 Vehicle Removed To		☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										76 Vehicle Removed To		☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										126d																																					
01	47 Authority		☐ Owner ☒ Driver ☐ Police										77 Authority		☒ Owner ☐ Driver ☐ Police										126e																																					
01	48 Alcohol/Drug Test		Given: ☒ No ☐ Yes ☐ Refused										49 Hazardous Material		Given: ☒ No ☐ Yes ☐ Refused										78 Alcohol/Drug Test		Given: ☒ No ☐ Yes ☐ Refused										79 Hazardous Material		☒ None ☐ On Board ☐ Spill										127a													
01	Type: ☐ Breath ☐ Blood ☐ Urine												Hazard Class		Placard No.										Type: ☐ Breath ☐ Blood ☐ Urine												Hazard Class		Placard No.										127b													
01	Results: 0. % ☐ Pending												50 Carrier No.		☐ USDOT ☒ None										51 GVWR/GCWR		☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No.		☐ USDOT ☒ None										81 GVWR/GCWR		☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										127c	
02	52 Motor Carrier or Government Entity												82 Motor Carrier or Government Entity												127d																																					
02	Number & Street												Number & Street												127e																																					
02	City		State		Zip												City		State		Zip												128																													
02	135 Damage To Other Property		☐ Yes (If Yes, describe) ☒ No										136 Charge		137 Summons. No.										138 Charge		139 Summons. No.										129																									
02	140 Charge												141 Summons. No.												142 Charge		143 Summons. No.										130																									
02	83		84		85		86		87		88		89		90		91		92		93		94		95		Names & Addresses of Occupants - If Deceased, Date & Time of Death										131																									
A	01		01		01		05		22		M								11		04						EDUARDO J ASTURIASCASTELLAN										132																									
B	02		01		01		05		35		F								11		04						HILARY F MURPHY										133																									
C	02		06		01		05		04M		F								06		06						ROSEMARY - MURPHY										134																									
D																											352 SEAMAN BEACHWOOD NJ 08722										134																									

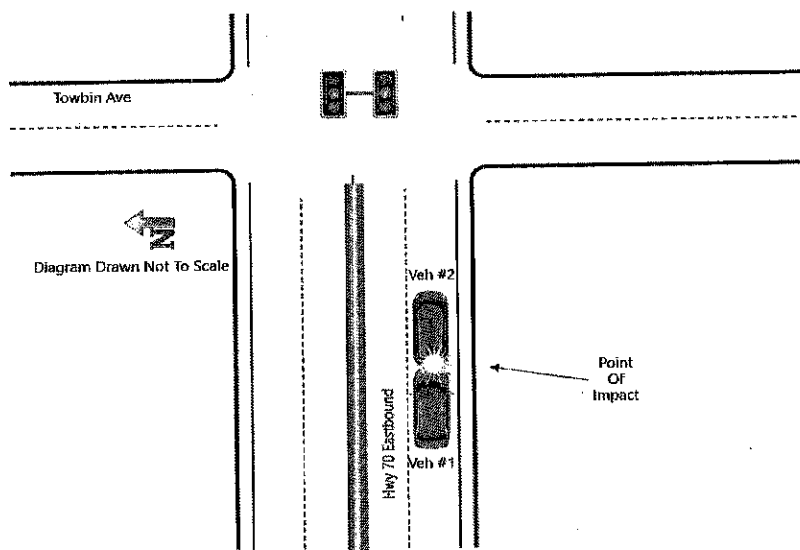
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-021764**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Both drivers were traveling Eastbound on Hwy 70 approaching the traffic light for Towbin Avenue. Driver #2 said that she was at a full stop when vehicle #1 struck her vehicle from behind. Driver #1 said that he was slowing to a stop and struck vehicle #2 from behind causing minor damage to both vehicles and no reported injuries at this time.

146 Officer's Signature

MERRILL D

147 Badge #

323

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending☒ Complete

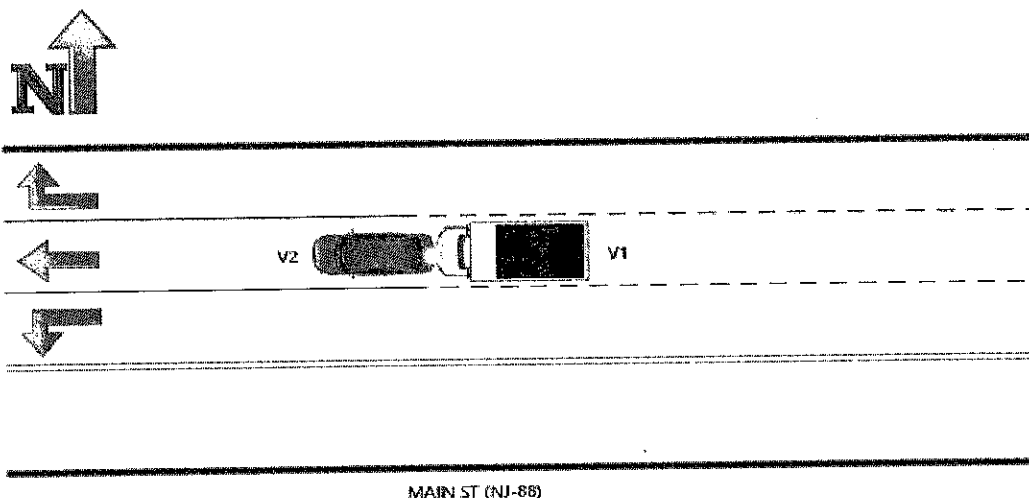
PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☐ Reportable ☒ Non-Reportable ☐ Change Report							
05	1 Case Number	22-020471		10 Crash Occurred On:	MAIN STREET	11 Speed Limit	25	0088	118a	09	
05	2 Police Dept of	LAKEWOOD POLICE		12 Route No.	25	13 Milepost	25	18 Speed Limit	118b	60	
01	3 Station/Precinct	01		14	15	16	17 Cross Road Name	19 NB	119a	25	
02	4 Date of Crash	03/16/22		5 Day Of Week	WEDNESDAY	6 Time (use 2400 hrs)	1537	7 Municipality Code	1514	119b	-
01	8 Total Killed	1		9 Total Injured	1	21 Latitude	40.090060	22 Longitude	-74.214220	120a	01
04	23 Veh #	1		24 Policy No.	2583045-C22-32	25 NJ Ins. Code	-	53 Veh #	2	54 Policy No.	8686235
02	26 Driver's First Name	STEVEN J KORKOWSKI		27 Number & Street	71 GRANDVIEW TER	28 City	STATEN ISLAND	56 Driver's First Name	JUNASIA E WATTS-BURNEY	57 Sex	F
01	29 State	NY		30 Zip	10308	58 City	LAKEWOOD	59 State	NJ	60 Zip	08701
02	31 Eyes	02		32 DL Class	A	33 Restrictions	-	34 Endorsements	-	35 State	NY
01	36 Driver's License Number	172941904		37 DOB	07/22/1986	38 Expires	07	39 State	NY	40 Eyes	02
01	41 Owner's First Name	- RICHMOND NURSE -		42 DOB	07/22/1986	43 Expires	07	44 State	NY	45 Eyes	02
02	46 Number & Street	2371 FOREST AVE		47 City	STATEN ISLAND	48 State	NY	49 Zip	10308	50 Eyes	02
01	51 Make	GMC		52 Model	999	53 Color	WHI	54 Year	2006	55 Plate No.	15777MJ
02	56 VIN	1GDG5C1G56F407035		57 Expires	03	58 State	NY	59 Make	HOND	60 Model	ACC
01	61 Vehicle Removed To	-		62 VIN	1HGCVF17JA187352	63 Expires	10	64 State	NJ	65 Color	GRY
02	66 Hazardous Material	-		67 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused	68 Type	Breath ☐ Blood ☐ Urine	69 Results	0 - % ☐ Pending	70 Hazard Class	-
01	71 Motor Carrier or Government Entity	RICHMOND NURSERY CORP		72 Number & Street	2371 FOREST AVE	73 City	STATEN ISLAND	74 State	NY	75 Zip	10308
03	76 Damage To Other Property	☐ Yes (If Yes, describe) ☒ No		77 Motor Carrier or Government Entity	-	78 Number & Street	-	79 City	-	80 State	-
04	81 Charge	136 Charge		82 Summons. No.	137	83 Charge	140 Charge	84 Summons. No.	141	85 Charge	142 Charge
01	86 Occupants - If Deceased, Date & Time of Death	STEVEN J KORKOWSKI		87 Occupants - If Deceased, Date & Time of Death	JUNASIA E WATTS-BURNEY	88 Occupants - If Deceased, Date & Time of Death	AMOR - LIVINGSTON	89 Occupants - If Deceased, Date & Time of Death	115 MICHELE WAY	90 Occupants - If Deceased, Date & Time of Death	LAKEWOOD NJ 08701

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD POLICE Code: 01
Station: - Case No: 22-020471

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
I														
N														
V														
O														
L														
V														
E														
I														
D														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 struck V2 from behind on Main Street (NJ-88), in the center lane approximately 200 feet east of Clifton Avenue. There was heavy traffic on westbound Ocean Avenue due to Clifton Avenue northbound being shut down by police, due to a vehicle fluid spill awaiting cleanup.

Driver 1 said that a vehicle from the right turning lane cut in front of V2 causing it to brake abruptly. He attempted to stop in time but was unable to. I observed no visible damage to V1 and very minor damage to V2's rear bumper only. V2 appeared to have some pre-existing damage, such as a broken side mirror.

Driver 1 is responsible due to insufficient following distance. When asked if she was injured, Driver 2 said that her back possibly was, but she declined to have EMS respond.

146 Officer's Signature

BURKHARDT B

147 Badge #

361

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending ☒ Complete

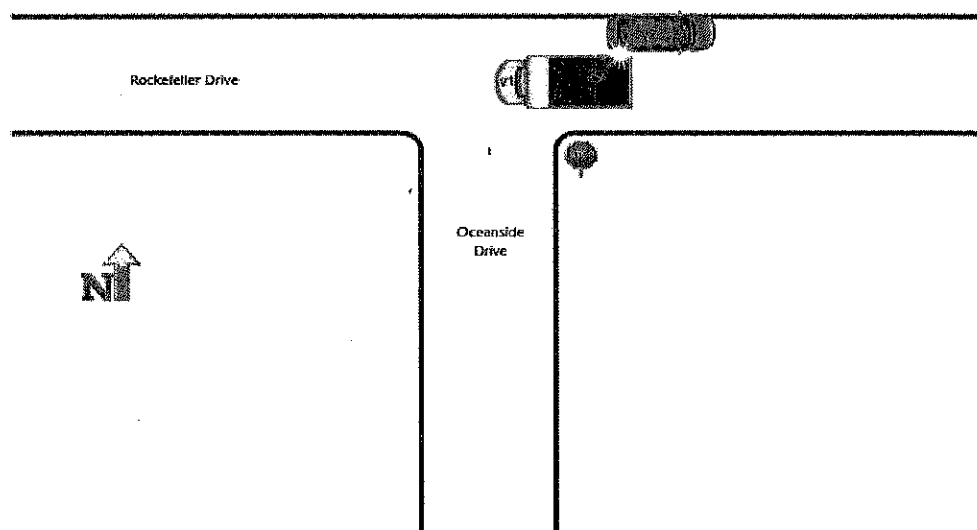
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
 Station: - Case No: 22-018146

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL IF INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

**Veh 1 (Lakewood DPW Truck) was backing up and side swiped Veh 2's passenger side rear bumper area. Veh 1's side step is what struck the side of Veh 2 causing damage.
 No Injuries Reported.**

**Insurance Information for Lakewood Township Department of Public works vehicle:
 State of New Jersey: Ocean County Municipal Joint Insurance Fund Self Insured I.D. 05-87
 Issued by Perma Inc 9 Campus Drive Suite 216 Parsippany 07054.**

146 Officer's Signature

MORGAN T

147 Badge #

349

148 Reviewer

SGT. M. LORENC

Badge #

316

149 Case Status

☐ Pending ☒ Complete

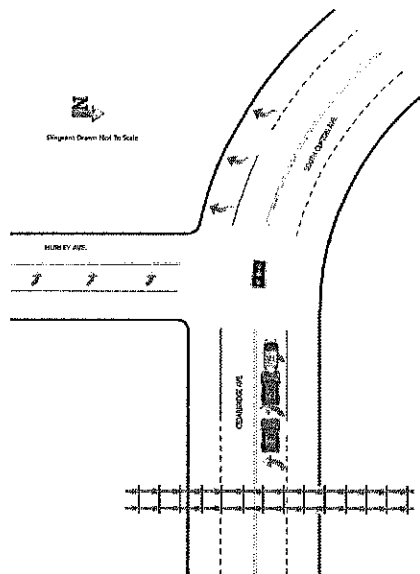
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
 Station: - Case No: 22-019920

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
F														
I														
N														
V														
O														
L														
H														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of vehicle #1 stated she was stopped on Cedarbridge Ave. westbound at the intersection with Hurley Ave. when her vehicle was rear ended by vehicle #2. Driver #1 proceeded to make a left turn onto Hurley Ave. and drive into the rear parking lot of Petro Oil (99 River Ave.) to move her vehicle out of the roadway. At this time vehicle #2 drove past vehicle #1 and fled the area. Driver #1 described vehicle #2 as a gray Kia Sportage bearing NJ reg/ KCKD32. No injuries were reported while on scene. -end-

146 Officer's Signature

ALLEN W

147 Badge #

287

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending☒ Complete

96	PAGE 1 OF 2 ☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable ☐ Non-Reportable ☐ Change Report										
05	1 Case Number										10 Crash Occurred On: PROSPECT ST										11 Speed Limit 35		118a
97	22-020065										Road Name ELAINE ST										12 Route No. 25		118b
01	2 Police Dept of LAKEWOOD TOWNSHIP Code 01										☒ At Intersection With ☐ Feet ☐ Miles ☐ N ☐ E ☐ S ☐ W of: ELAINE ST										13 Milepost 25		119a
02	3 Station/Preinct										14 ☐ 15 ☐ 16 ☐ 17 Cross Road Name										☐ NB ☐ EB ☐ SB ☐ WB		119b
07	4 Date of Crash 03/15/22 5 Day Of Week TUESDAY										6 Time (use 2400 hrs) 0644 7 Municipality Code 1514 8 Total Killed -- 9 Total Injured 1										20 Route/Name 40.07369 22 Longitude -74.22268		120a
01	23 Veh # 1 24 Policy No. 4529-89-17-25 25 NJ Ins. Code 148										53 Veh # P 54 Policy No. - 55 NJ Ins. Code -										18 Speed Limit 25		120b
04	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										☐ Parked ☐ Ped ☒ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run												121a
02	26 Driver's First Name BARUCH Initial T Last Name LERNER 29 Sex M										56 Driver's First Name MANUEL Initial - Last Name ALAVEZ 59 Sex M												121b
01	27 Number & Street 73 SHELLY LN										57 Number & Street 492 MASSACHUSETTS APT 2												121c
01	28 City LAKEWOOD State NJ Zip 08701										58 City LAKEWOOD State NJ Zip 08701												122
1	30 Eyes 6 DL Class D Restrictions - Endorsements - 31 State NJ										60 Eyes - DL Class - Restrictions - Endorsements - 61 State -												123
03	32 Driver's License Number L27220778304806 33 DOB 04/23/1980 34 Expires 04 26										62 Driver's License Number - 63 DOB - 64 Expires - 01												124
03	35 Owner's First Name CHANA Initial S Last Name LERNER										65 Owner's First Name - Initial - Last Name -												125
07	36 Number & Street 73 SHELLEY LANE										66 Number & Street -												126a
01	37 City LAKEWOOD State NJ Zip 08701										67 City - State - Zip -												126b
13	38 Make TOYT 39 Model CAM 40 Color TN 41 Year 2007 42 Plate No. G50NTE 43 State NJ										68 Make - 69 Model - 70 Color - 71 Year - 72 Plate No. - 73 State -												126c
01	44 VIN 4T1BE46K37U535137 45 Expires 05 22										74 VIN - 75 Expires -												126d
01	46 Vehicle Removed To ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded										76 Vehicle Removed To ☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded												126e
113	47 Authority ☐ Owner ☒ Driver ☐ Police										77 Authority ☐ Owner ☐ Driver ☐ Police												127a
114	48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending										78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending												127b
01	49 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class - Placard No. -										79 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class - Placard No. -												127c
02	50 Carrier No. ☐ USDOT ☒ None ☐ MC/MX										80 Carrier No. ☐ USDOT ☒ None ☐ MC/MX												127d
01	51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs												127e
02	52 Motor Carrier or Government Entity -										82 Motor Carrier or Government Entity -												128
01	Number & Street -										Number & Street -												129
01	City - State - Zip -										City - State - Zip -												130
01	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No																						131
01	Oper. - 136 Charge - 137 Summons. No. -										Oper. - 138 Charge - 139 Summons. No. -												132
02	Oper. - 140 Charge - 141 Summons. No. -										Oper. - 142 Charge - 143 Summons. No. -												133
01	83 01 84 01 85 05 86 41 87 M 88 - 89 - 90 - 91 11 92 04 93 - 94 - 95 -										Names & Addresses of Occupants - If Deceased, Date & Time of Death												134
A	BARUCH T LERNER										73 SHELLY LN LAKEWOOD NJ 08701												135
B	MANUEL - ALAVEZ										492 MASSACHUSETTS AF LAKEWOOD NJ 08701												136
C																							137
D																							138

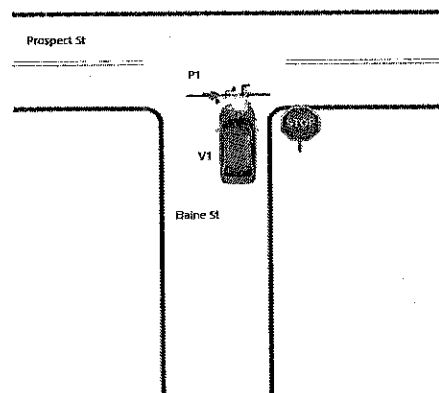
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: - Case No: **22-020065**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A L E I N V O L V E I D	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 was traveling northbound on Elaine St, attempted to make a right turn onto Prospect St, and crashed into a Pedalcyclist who was traveling Eastbound on Prospect St.

Driver 1 stated he was traveling Northbound on Elaine St. and stopped at the stop sign on Elaine & Prospect. He then attempted to make a right turn onto Prospect St and crashed into a Pedalcyclist. Driver 1 said that he did not see the Pedalcyclist.

The Pedalcyclist stated he was traveling Eastbound on Prospect St when vehicle 1 crashed into the right side of his bicycle.

The Pedalcyclist had a complaint of pain from his right upper leg and knee. Both the bicycle and vehicle sustained minor damage.

Based on my observations and speaking with both parties, I determined that driver 1 was at fault for failing to see the Pedalcyclist who had the right of way.

146 Officer's Signature

GARRETSON C

147 Badge #

391

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending ☒ Complete

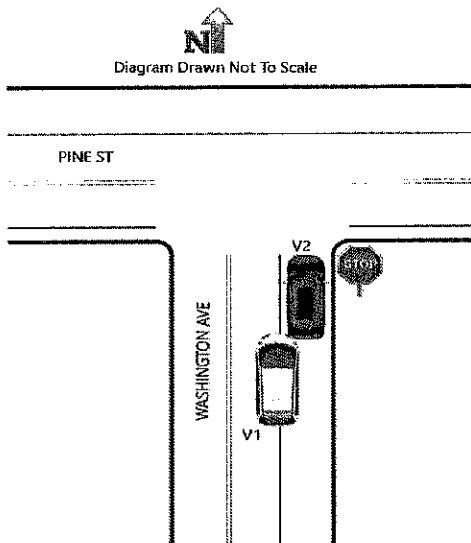
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-020231**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V2 stated she was traveling north on Washington Ave. She was in the right lane stopped at the stop sign waiting to turn right onto Pine St. While stopped, V1 struck the rear of V2. V2 was pushed into the intersection. The driver moved V2 onto the shoulder of Pine St. facing east. V1 turned left onto Pine St. and fled the scene.

The driver of V2 believed V1 was a larger vehicle, possibly an SUV or van. She believed the driver was a female. No color or license plate were obtained. I observed white or silver paint transfer on V2.

Based on my investigation, V1 caused the crash by striking V2 while V2 was stopped at the stop sign.

146 Officer's Signature

WITTMANN V

147 Badge #

346

148 Reviewer

CM

Badge #

332

149 Case Status

☒ Pending
 ☐ Complete

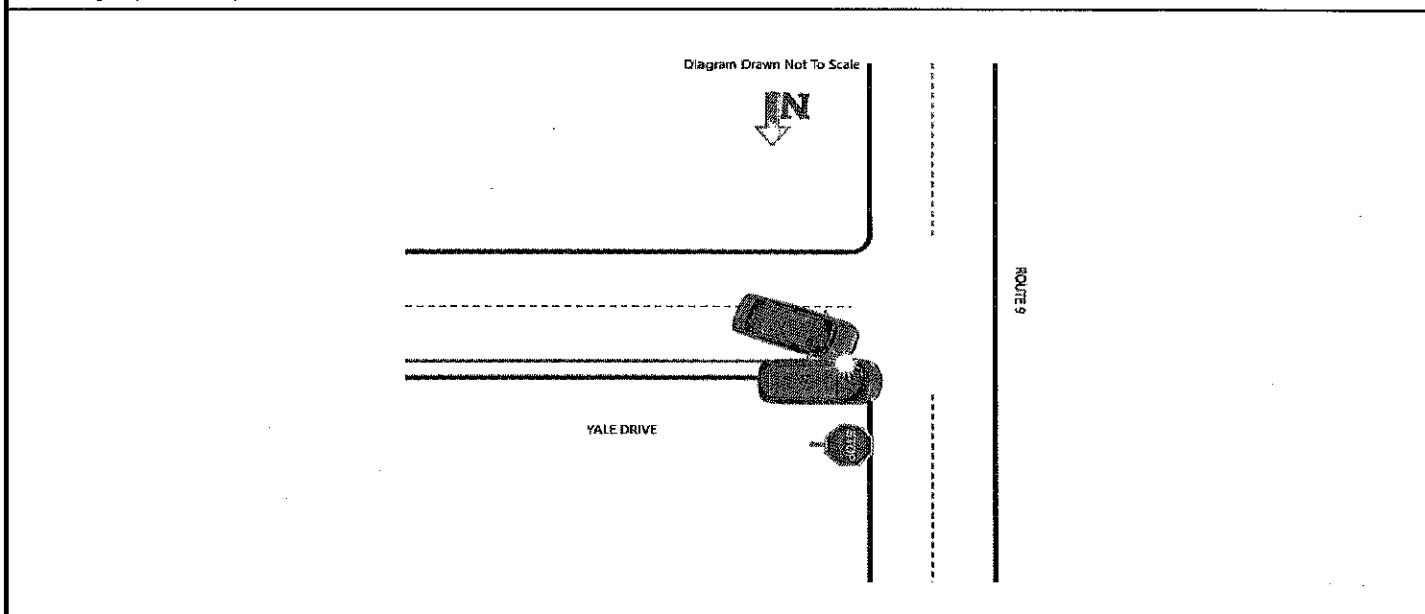
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-020459**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
I														
N														
V														
O														
L														
V														
E														
D														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 1 STATED HE WAS ATTEMPTING TO MAKE A RIGHT HAND TURN ON TO ROUTE 9 FROM YALE DRIVE WHEN HE WAS STUCK BY VEHICLE 2 ON THE FRONT PASSENGER SIDE OF HIS VEHICLE.

DRIVER OF VEHICLE 2 STATED THAT HE WAS TRAVELING WEST ON YALE DRIVE WHEN HE NOTICED VEHICLES HAD THEIR LEFT TURN SIGNALS ON INDICATING THEY WERE WAITING TO MAKE A LEFT TURN. DRIVER 2 ADVISED ME HE ATTEMPTED TO GO AROUND THE VEHICLES IN FRONT OF HIM WHEN HE WAS STRUCK BY VEHICLE 1 ON THE DRIVER SIDE DOOR.

YALE DRIVE IS A TWO LANE ROAD WITH WEST AND EAST BOUND LANES. VEHICLE 2 IMPROPERLY PASSED THE CARS IN FRONT OF HIM CAUSING THE CRASH TO OCCUR.

INSURANCE FOR VEHICLE 1
HERTZ CORPORATION LLC 8501 WILLIAMS ROAD, ESTERO, FL 33928
SELF INSURER NO. 05
EFFECTIVE SINCE 03/01/2018

146 Officer's Signature

HOIRIGAN D

147 Badge #

429

148 Reviewer

DIBIASE

Badge #

286

149 Case Status

☐ Pending ☒ Complete

2

[illegible]

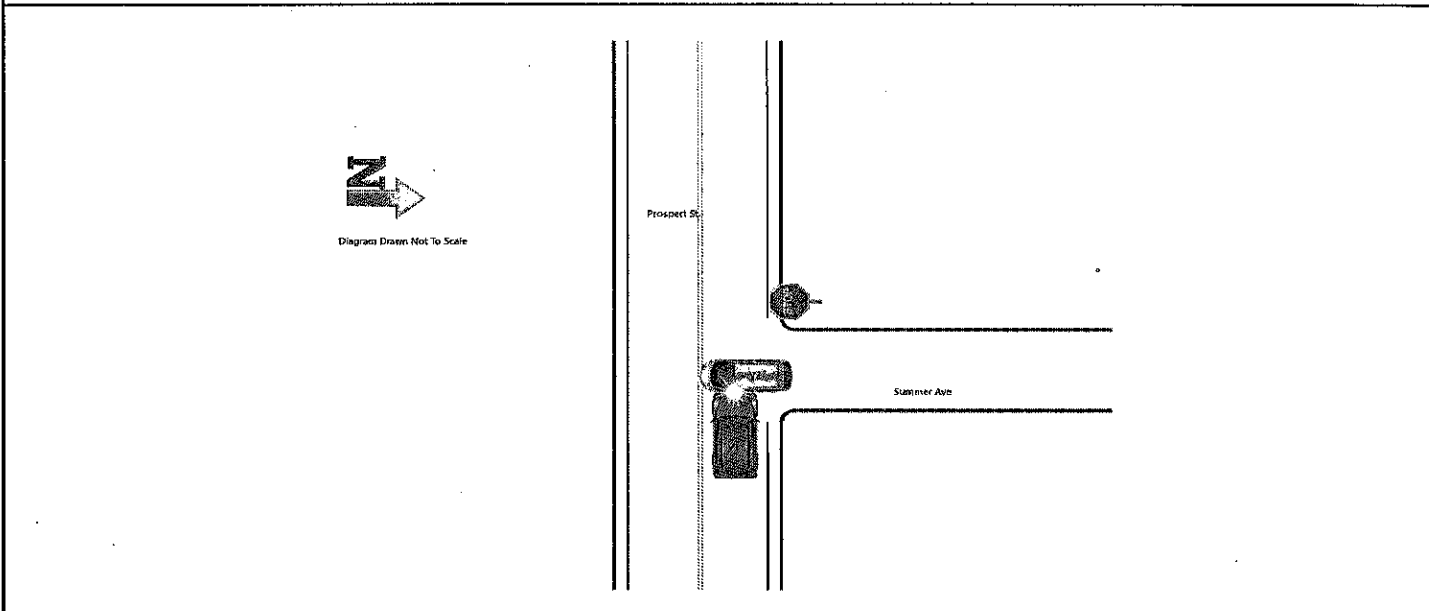
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-014985**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated that she was traveling west bound on Prospect St. when vehicle 2 made a left hand turn in front of her causing the crash. There were no injuries reported or observed to the occupant of vehicle 1. Vehicle 1 was driven from the scene by the driver.

Driver 2 stated she was making a left hand turn on to Prospect St from Summer Ave., "thought she had enough time", and crashed into vehicle 1. There were no injuries reported or observed to the occupants of vehicle 2. Vehicle 2 was towed from the scene by Heshy's towing by the driver's authority.

Based on driver statements I find driver 2 at fault of the crash for failure to yeild to the right of way.

146 Officer's Signature
MOONEY JR M

147 Badge #
330

148 Reviewer
EM

Badge #
288

149 Case Status
☐ Pending ☒ Complete

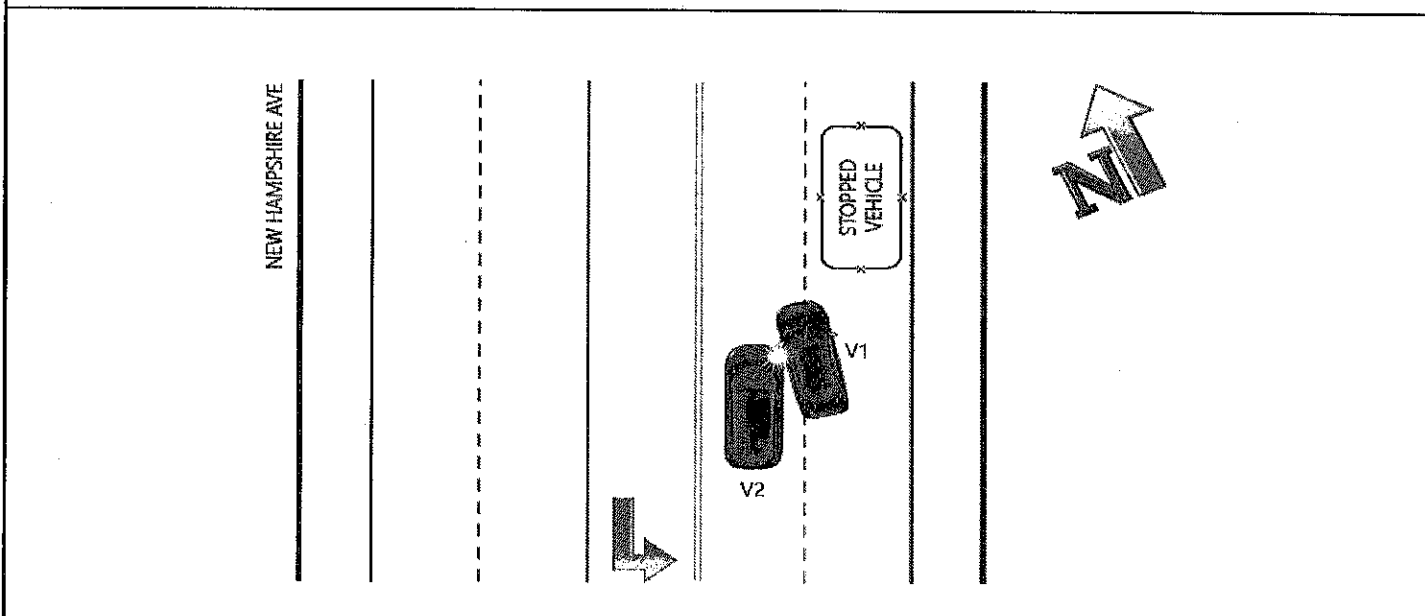
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD POLICE** Code: **01**
 Station: - Case No: **22-020479**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
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V														
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 and V2 crashed on New Hampshire Avenue approximately 300 feet north of Cedarbridge Avenue. Prior to the crash V1 was in the right lane, slightly ahead of V2 which was in the left lane.

Driver 1 stated that a large military style vehicle was stopped in the roadway blocking his lane of travel (box 118b); he attempted to move to the left lane and struck V2 which was in his blind spot. He noted that this vehicle was not stopped in traffic, it was by itself and not moving for unknown reason(s).

Driver 2 stated that V1 tried to change lanes because a military style vehicle was blocking the right lane, and ended up striking V2.

Independent witness Lisa Romano-Perez corroborated these statements.

I find Driver 1 responsible due to making an unsafe lane change. The unidentified vehicle blocking the right lane was a contributing circumstance to the crash.

146 Officer's Signature

BURKHARDT B

147 Badge #

361

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2										New Jersey Police Crash Investigation Report										☒ Reportable ☐ Non-Reportable ☐ Change Report																																																																																																																								
05	1 Case Number										10 Crash Occurred On: MASSACHUSETTS AVENUE										11 Speed Limit 35										0637																																																																																																														
97	22-020480										12 Route No.										13 Milepost										18 Speed Limit 35										02																																																																																																				
01	2 Police Dept of LAKEWOOD TOWNSHIP										Code 01										17 Cross Road Name PROSPECT STREET										19 To 16 From										20 Route/Name										21 Latitude										22 Longitude										04																																																																						
98	3 Station/Precinct										4 Date of Crash mm dd yy 03/16/22										5 Day of Week WEDNESDAY										6 Time (use 2400 hrs) 1844										7 Municipality Code 1514										8 Total Killed										9 Total Injured										25																																																																						
99	23 Veh # 1										24 Policy No. 939613355										25 NJ Ins. Code 054										53 Veh # 2										54 Policy No. 60532671										55 NJ Ins. Code 228										119b																																																																																
05	26 Driver's First Name Initial Last Name GEDALIA WEIL										29 Sex M										56 Driver's First Name Initial Last Name IVAN SAUCEDOMUNOZ										59 Sex M										120a																																																																																																				
01	27 Number & Street 150 SPRUCE ST										28 City LAKEWOOD NJ 08701										57 Number & Street 2747 HOOPER AVE APT 9-10										58 City BRICK NJ 08723										01																																																																																																				
100a	30 Eyes 2										DL Class D										Restrictions										Endorsements										31 State NJ										60 Eyes 2										DL Class I										Restrictions										Endorsements										61 State NJ										121a																																								
03	32 Driver's License Number W22712760005942										33 DOB mm dd yyyy 05/28/1994										34 Expires mm yy 05 22										62 Driver's License Number S08663770005942										63 DOB mm dd yyyy 05/14/1994										64 Expires mm yy										121b																																																																																
106	35 Owner's First Name Initial Last Name GEDALIA WEIL										65 Owner's First Name Initial Last Name INNOVATIVE INNOVATIVE HEAT										36 Number & Street 150 SPRUCE ST										66 Number & Street 501 PROSPECT ST; 108										122																																																																																																				
01	37 City LAKEWOOD NJ 08701										67 City LAKEWOOD NJ 08701										38 Make HOND										39 Model ODY										40 Color BLK										41 Year 2014										42 Plate No. R94PHK										43 State NJ										68 Make FORD										69 Model TRA										70 Color WHI										71 Year 2017										72 Plate No. F78JCR										73 State NJ										123
03	44 VIN 5FNRL5H49EB509774										45 Expires 12 22										74 VIN 1FTYR2CM9HKA20346										75 Expires 08 22										04																																																																																																				
02	46 Vehicle Removed To										76 Vehicle Removed To										47 Authority Owner Driver Police										77 Authority Owner Driver Police										124																																																																																																				
112	48 Alcohol/Drug Test Given: No Yes Refused										49 Hazardous Material None On Board Spill										78 Alcohol/Drug Test Given: No Yes Refused										79 Hazardous Material None On Board Spill										125																																																																																																				
115	Type: Breath Blood Urine										Hazard Class										Placard No.										Type: Breath Blood Urine										Hazard Class										Placard No.										126a																																																																																
116	50 Carrier No. USDOT MC/MX										51 GVWR/GCWR Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs										80 Carrier No. USDOT MC/MX										81 GVWR/GCWR Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs										126b																																																																																																				
04	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity										53 Number & Street										83 Number & Street										126c																																																																																																				
	City										State										Zip										City										State										Zip										126d																																																																																
	135 Damage To Other Property Yes (If Yes, describe) No										137 Summons. No. 1514-A-292691										138 Charge										139 Summons. No.										126e																																																																																																				
	136 Charge 39:3-10										140 Charge										141 Summons. No.										142 Charge										143 Summons. No.										126f																																																																																										
	83 84 85 86 87 88 89 90 91 92 93 94 95										Names & Addresses of Occupants - If Deceased, Date & Time of Death																														127a																																																																																																				
A	V1 01 01 05 27 M										GEDALIA WEIL 150 SPRUCE ST LAKEWOOD NJ 08701																														127b																																																																																																				
B	V1 03 01 05 24 F										LEAH WEIL 150 SPRUCE ST LAKEWOOD NJ 08701																														127c																																																																																																				
C	V1 04 01 05 3 M										SHLOMO WEIL 150 SPRUCE STREET LAKEWOOD NJ 08701																														127d																																																																																																				
D	V1 08 01 05 02M M										ZEV WEIL 150 SPRUCE ST LAKEWOOD NJ 08701																														127e																																																																																																				

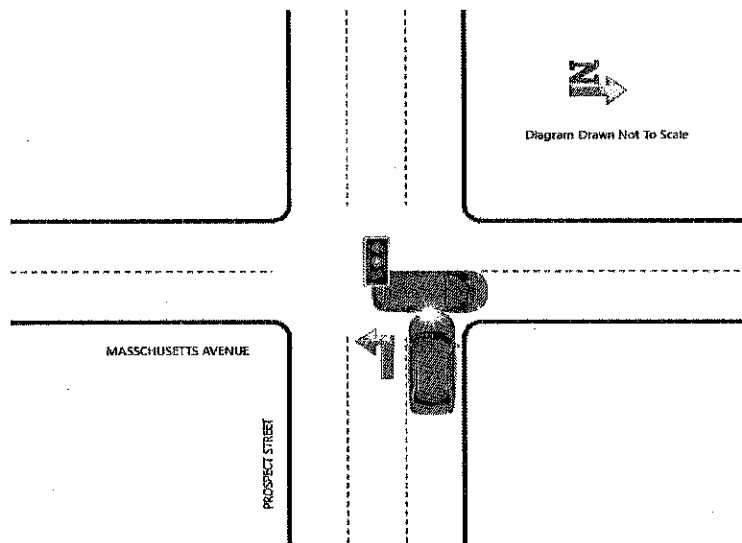
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-020480**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	
	V1	09	01	05	2	M	-	-	-	11	04	-	-	MOSHE - WEIL 150 SPRUCE ST LAKEWOOD NJ 08701 -
	V2	01	01	05	27	M	-	-	-	11	04	-	-	IVAN - SAUCEDOMUNOZ 2747 HOOPER AVE APT 9-BRICK NJ 08723 -

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 1 STATED HE WAS TRAVELING WESTBOUND ON PROSPECT STREET WHEN HE NOTICED THE CARS IN FRONT OF HIM WITH THEIR LEFT TURNING SIGNALS ON. DRIVER 1 ADVISED ME HE ATTEMPTED TO GO AROUND THE CARS TO PROCEED STRAIGHT ON PROSPECT ST. WHEN HE STRUCK VEHICLE 2 ON THE PASSENGER SIDE OF THE VEHICLE.

DRIVER OF VEHICLE 2 STATED HE WAS AT THE INTERSECTION OF MASSACHUSETTS AVE AND PROSPECTS ST., STOPPED AT THE STOP SIGN. DRIVER 2 ADVISED ME THAT THE VEHICLES IN THE EAST AND WESTBOUND LANES CAME TO A COMPLETE STOP TO LET HIM CROSS OVER THE INTERSECTION AND VEHICLE 1 CAME AROUND THE CAR THAT WAS STOPPED ALLOWING HIM TO ENTER THE INTERSECTION. DRIVER 2 STATED HE PROCEEDED TO CONTINUE ON PROSPECT WHEN HE WAS STRUCK BY VEHICLE 1 ON THE PASSENGER SIDE DOOR.

UPON DOING MY INVESTIGATION I OBSERVED THE DAMAGE TO VEHICLE 2 TO BE IN THE MIDDLE OF THE VEHICLE ON THE PASSENGER SIDE WHICH WOULD INDICATE THAT VEHICLE 2 WAS HALF WAY THROUGH THE INTERSECTION WHEN VEHICLE 1 STRUCK VEHICLE 2 CAUSING THE ACCIDENT TO OCCUR.

146 Officer's Signature
HOIRIGAN D

147 Badge #
429

148 Reviewer
DIBIASE

Badge #
286

149 Case Status
☐ Pending ☒ Complete

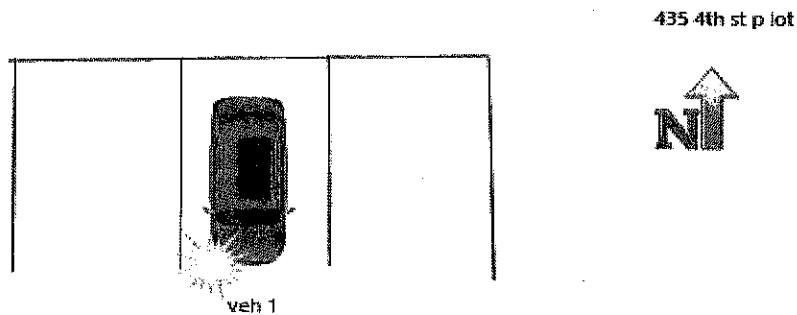
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **--** Case No: **22-020491**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A L L I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

OWNER OF VEHICLE 1 STATED HER VEHICLE WAS PARKED IN HER MARKED PARKING SPOT AND WAS STRUCK BY VEHICLE WHILE PARKED. IT APPEARS THAT THE SUSPECT VEHICLE MAY HAVE BEEN TRYING TO PARK IN THE MARKED PARKING SPOT THAT WAS OPEN NEXT TO HER, AND WHEN DOING SO STRUCK HER VEHICLE. THE SUSPECT VEHICLE THAT STRUCK HER VEHICLE LEFT A LIGHT COLOR PAINT TRANSFER, MAY BE POSSIBLE WHITE, GRAY, OR SILVER. THERE ARE NO SURVEILLANCE CAMERAS IN THE AREA SO SUSPECT DRIVER IDENTITY AND PLATE TO THE VEHICLE ARE UNKNOWN.

146 Officer's Signature

CLARKE N

147 Badge #

334

148 Reviewer

JP

Badge #

290

149 Case Status

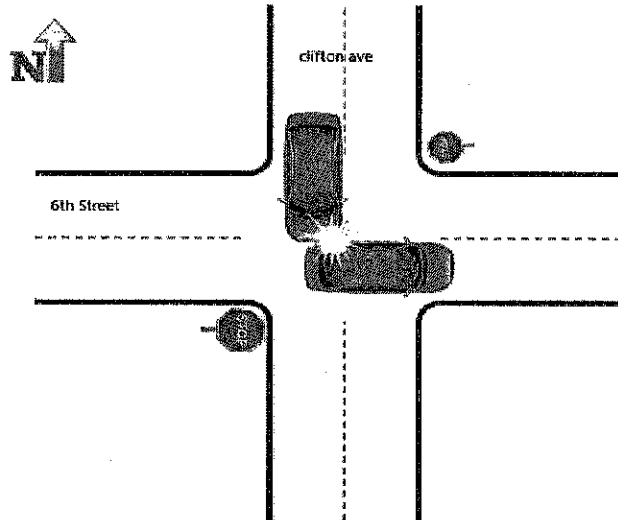
☒ Pending ☐ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-020608

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

D1 stated he was traveling south on Clifton Ave when the suspect Veh 2 shot out from the side street (6th Street). D1 stated his front driver's side bumper fender and headlight were damaged.

D1 stated the suspect vehicle was a white car, a little bigger then a sedan (possibly Subaru Outback model style).

The suspect vehicle continued east on 6th Street. No further information.

The damage to V2 could possibly be to the rear driver's side bumper fender area .

No Reported Injuries.

146 Officer's Signature

MORGAN T

147 Badge #

349

148 Reviewer

SGT. M. LORENC

Badge #

316

149 Case Status

☐ Pending ☒ Complete

PAGE 1 OF 2										New Jersey Police Crash Investigation Report										☒ Reportable ☐ Non-Reportable ☐ Change Report																																																																																																																																																																																																																																																																																																																																										
05	1 Case Number 22-020694										10 Crash Occurred On: MADISON AVE										11 Speed Limit 40										12 Route No. 0009										13 Milepost										18 Speed Limit 25																																																																																																																																																																																																																																																																																																											
01	2 Police Dept of LAKEWOOD TOWNSHIP F01										3 Station/Precinct 10										4 Date of Crash 03/17/22										5 Day Of Week THURSDAY										6 Time 1235										7 Municipality Code 1514										8 Total Killed --										9 Total Injured --										21 Latitude 40.10346										22 Longitude -74.21678																																																																																																																																																																																																																																																																			
02	23 Veh # 1										24 Policy No.										25 NJ Ins. Code										53 Veh # 2										54 Policy No.										55 NJ Ins. Code										56 Driver's First Name EZRIEL										56 Driver's Last Name KRIGER										57 Number & Street 12 BELVEDERE LN										58 City LAKEWOOD										58 State NJ										58 Zip 08701																																																																																																																																																																																																																																															
04	26 Driver's First Name EZRIEL										26 Driver's Last Name KRIGER										29 Sex M										60 Eyes 6										61 State NJ										62 Driver's License Number K74132586708026										63 DOB 08/17/2002										64 Expires 08/24										65 Owner's First Name THE BAR LLC										65 Owner's Last Name -										66 Number & Street 199 LEE AVE STE 675										67 City BROOKLYN										68 Make TOYT										69 Model COR										70 Color WHI										71 Year 2021										72 Plate No. B85PCZ										73 State NJ										74 VIN JTDEPMAE1MJ175599										75 Expires 08/22										76 Vehicle Removed To Driven										77 Authority Driver										78 Alcohol/Drug Test None										79 Hazardous Material None										80 Carrier No. None										81 GVWR/GCWR None										82 Motor Carrier or Government Entity None										83 Damage To Other Property No										84 Charge 136 Charge										85 Summons No. 137 Summons No.										86 Charge 140 Charge										87 Summons No. 141 Summons No.										88 Charge 142 Charge										89 Summons No. 143 Summons No.										90 Names & Addresses of Occupants - If Deceased, Date & Time of Death EZRIEL KRIGER 12 BELVEDERE LN LAKEWOOD NJ 08701									

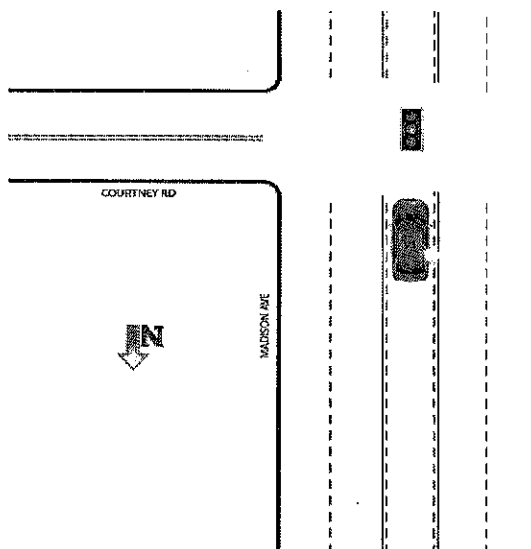
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-020694**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A L L I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

VEHICLE 1 WAS TRAVELING SOUTH ON MADISON AVE APPROACHING COURTNEY RD.

DRIVER 1 STATED THAT VEHICLE 2 WAS IN THE MIDDLE LANE AND SIDESWIPED HIS VEHICLE AS HE WAS WAITING IN THE LEFT TURN LANE. HE DOES NOT BELIEVE DRIVER 2 REALIZED THERE WAS A COLLISION. HE DESCRIBED THE VEHICLE AS A BLACK OR DARK BLUE OLDER STYLE PICKUP TRUCK, POSSIBLY AN F250. HE COULD NOT PROVIDE A LICENSE PLATE. THERE ARE SURVEILLANCE CAMERAS IN THE AREA BUT DUE TO THE HOLIDAY, I WAS UNABLE TO ACCESS THEM.

VEHICLE 1 IS A RENTAL VEHICLE AND SELF INSURED BY EZ RENTAL 202 MAIN ST LAKEWOOD, NJ 08701 (732)736-8222.

146 Officer's Signature

RIVERA M

147 Badge #

327

148 Reviewer

MY

Badge #

329

149 Case Status

☒ Pending ☐ Complete

96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report											
05	1 Case Number				10 Crash Occurred On: PINE ST										11 Speed Limit		25													
97	22-020700														40															
01	2 Police Dept of				Code		☒ At Intersection With				Road Name		Dir		12 Route No.		Suffix		13 Milepost		18 Speed Limit									
98	LAKEWOOD TOWNSHIP				01		☐ Feet				☐ N ☐ E		of: MARTIN LUTHER KING DR								25									
01	3 Station/Precinct						☐ Miles				☐ S ☐ W		19 Ramp		To		17 Cross Road Name		☐ NB ☐ EB		☐ SB ☐ WB									
99																														
07	4 Date of Crash				5 Day Of Week		6 Time		7 Municipality		8 Total		9 Total		21 Latitude		22 Longitude													
100a	mm dd yy						(use 2400 hrs)		Code		Killed		Injured		40.07761		-74.21178													
01	03/17/22				THURSDAY		1259		1514		--		--																	
100b	23 Veh #				24 Policy No.		25 NJ Ins. Code				53 Veh #		54 Policy No.		55 NJ Ins. Code															
04	1				4029554260		148				2																			
101	☐ Parked				☐ Ped		☐ Pedalcyclist		☐ Resp To Emergency		☐ Hit & Run		☐ Parked				☐ Ped		☐ Pedalcyclist		☐ Resp To Emergency		☒ Hit & Run							
02	26 Driver's First Name				Initial		Last Name		29 Sex		56 Driver's First Name				Initial		Last Name		59 Sex											
102	YOCHVED				B		GOTTLIEB		-		F																			
02	27 Number & Street										57 Number & Street																			
103	253 COLES WAY																													
104	28 City				State		Zip				58 City				State		Zip													
2	LAKEWOOD				NJ		08701																							
30	Eyes		DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		Endorsements		61 State											
2	2		D				-		NJ		60								01											
105	32 Driver's License Number				33 DOB		34 Expires				62 Driver's License Number				63 DOB		64 Expires													
02	G67827906254832				mm dd yyyy		mm dd yyyy		04/28/1983		04				25															
106	35 Owner's First Name				Initial		Last Name				65 Owner's First Name				Initial		Last Name													
-	☐ Same As Driver				MORDECHAI		Y		GOTTLIEB		☐ Same As Driver																			
107	36 Number & Street										66 Number & Street																			
00	203 NORTH CREST PLACE																													
108	37 City				State		Zip				67 City				State		Zip													
01	LAKEWOOD				NJ		08701																							
109	38 Make		39 Model		40 Color		41 Year		42 Plate No.		43 State		68 Make		69 Model		70 Color		71 Year		72 Plate No.		73 State							
00	TOYT		SIE		GRY		2014		V33JPL		NJ																			
110	44 VIN				45 Expires						74 VIN				75 Expires															
01	5TDKK3DC1E5512167				12		22																							
111	46 Vehicle Removed To										76 Vehicle Removed To																			
00	☒ Driven				☐ Towed Disabled		☐ Towed Disabled & Impounded				☐ Driven				☐ Towed Disabled		☐ Towed Disabled & Impounded													
112	☐ Left At Scene				☐ Towed Impounded						☐ Left At Scene				☐ Towed Impounded															
113	47 Authority				☒ Owner		☒ Driver		☐ Police		77 Authority				☐ Owner		☐ Driver		☐ Police											
114	48 Alcohol/Drug Test				Given: ☐ No ☐ Yes ☐ Refused		Type: ☐ Breath ☐ Blood ☐ Urine		Results: 0, % ☐ Pending		49 Hazardous Material				Given: ☐ No ☐ Yes ☐ Refused		Type: ☐ Breath ☐ Blood ☐ Urine		Results: 0, % ☐ Pending		79 Hazardous Material									
00											☐ None ☐ On Board ☐ Spill										☐ None ☐ On Board ☐ Spill									
115											Hazard Class				Placard No.						Hazard Class				Placard No.					
116	50 Carrier No.				☐ USDOT		☒ None		51 GVWR/GCWR		☐ Weight <= 10,000 lbs		☐ Weight 10,001-26,000 lbs		☐ Weight >= 26,001 lbs		80 Carrier No.		☐ USDOT		☒ None		81 GVWR/GCWR		☐ Weight <= 10,000 lbs		☐ Weight 10,001-26,000 lbs		☐ Weight >= 26,001 lbs	
04																														
04																														
117	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity																			
118	Number & Street										Number & Street																			
119	City				State		Zip				City				State		Zip													
130																														
131	135 Damage To Other Property				☐ Yes (If Yes, describe)		☐ No																							
132	Oper.				136 Charge		137 Summons. No.		Oper.		138 Charge		139 Summons. No.																	
133	Oper.				140 Charge		141 Summons. No.		Oper.		142 Charge		143 Summons. No.																	
134																														
00																														
A	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death																
01	01	01	05	38	F	-	-	-	11	04	-	-	-	YOCHVED B GOTTLIEB																
01	03	01	05	19	F	-	-	-	11	04	-	-	-	253 COLES WAY LAKEWOOD NJ 08701																
01	06	01	05	14	F	-	-	-	04	04	-	-	-	SHOSHANA GOTTLIEB																
01	04	01	05	12	F	-	-	-	04	04	-	-	-	253 COLES WAY LAKEWOOD NJ 08701																
01	04	01	05	12	F	-	-	-	04	04	-	-	-	ALIZA GOTTLIEB																
01	04	01	05	12	F	-	-	-	04	04	-	-	-	253 COLES WAY LAKEWOOD NJ 08701																
01	04	01	05	12	F	-	-	-	04	04	-	-	-	ESTHER GOTTLIEB																
01	04	01	05	12	F	-	-	-	04	04	-	-	-	253 COLES WAY LAKEWOOD NJ 08701																

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**
Station: _____ Case No: **22-020700**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death		
	83	84	85	86	87	88	89	90	91	92	93	94	95			
ALL INVOLVED J	01	09	01	05	7	F	-	-	-	04	04	-	-	MIRIAM - GOTTLIEB	-	-
														253 COLES WAY LAKEWOOD NJ 08701		
	01	08	01	05	5	F	-	-	-	07	07	-	-	BATSHEVA - GOTTLIEB	-	-
														253 COLES WAY LAKEWOOD NJ 08701		
	01	07	01	05	3	F	-	-	-	05	05	-	-	CHAYA - GOTTLIEB	-	-
														253 COLES WAY LAKEWOOD NJ 08701		

144 Crash Diagram (NOT TO SCALE)

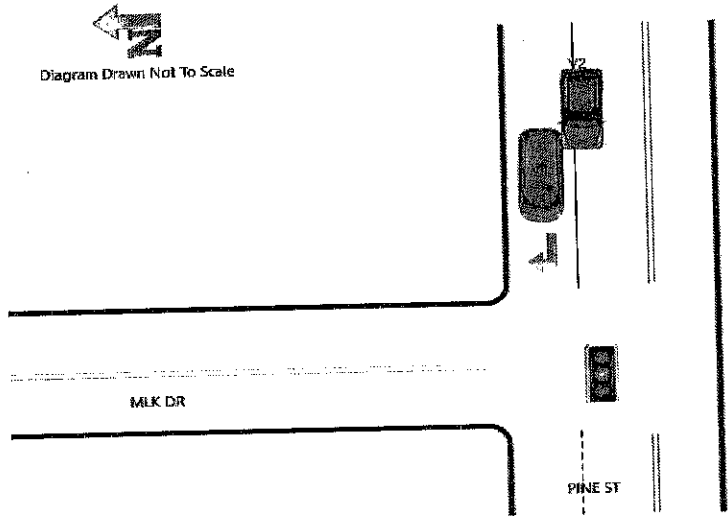


Diagram Drawn Not To Scale

145 Crash Description/Narrative

The driver of vehicle #1 reported that she was traveling on Pine St. approaching the intersection of Pine St. and Martin Luther King Dr. and was preparing to make a right turn onto Martin Luther King Dr. when her vehicle was struck by another vehicle that fled the area heading West on Pine St. She described the vehicle as a Suburban type vehicle with NJ registration C71CDJ.

There were no injuries reported at the scene of the crash. Vehicle #1 sustained scratches and dents to the rear driver side fender and quarter panel. The registration provided for the suspect vehicle comes back to an address in Point Pleasant, NJ and likely has damage to the front passenger side of the vehicle. I had Point Pleasant police respond to the address and the vehicle was not there at that time. They left a note for the registered owner to contact our department and as of this writing I have not spoken to the registered owner or anyone involved in the crash.

146 Officer's Signature
KOWALESKI S147 Badge #
319148 Reviewer
JPBadge #
290149 Case Status
☒ Pending ☐ Complete

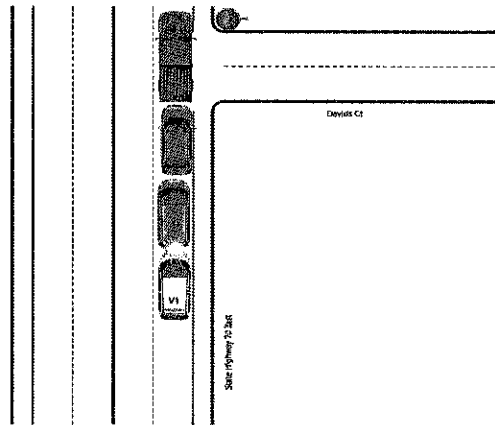
**New Jersey Police
Crash Investigation Report**

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-020918**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The Driver of Vehicle #1 stated that prior to the crash he was traveling east bound on State Highway 70. The Driver of Vehicle #1 stated that as he approached David's Court traffic began to slow and stop. The Driver of Vehicle #1 stated that he attempted to brake but slid into Vehicle #2. The Driver of Vehicle #1 did not report any injury as a result of the crash.

The Driver of Vehicle #2 stated that prior to the crash she was traveling east bound on State Highway 70. The Driver of Vehicle #2 stated that she was slowing for traffic and the rear of her vehicle was struck by Vehicle #1. The Driver of Vehicle #2 did not report any injury as a result of the crash.

I find the Driver of Vehicle #1 to be at fault for the crash.

END OF REPORT

Submitted By: **Ptl. R. Ingram #408**

146 Officer's Signature

INGRAM R

147 Badge #

408

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

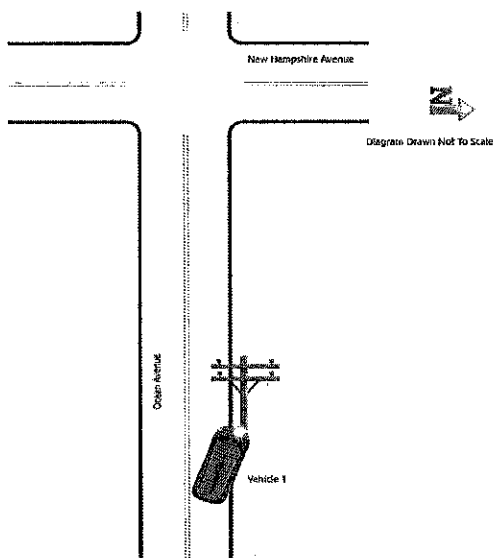
96	PAGE 1 OF 2	Fatal	New Jersey Police Crash Investigation Report										☒ Reportable ☐ Non-Reportable ☐ Change Report																																																																																																												
05	1 Case Number 22-020951										10 Crash Occurred On: OCEAN AVENUE										11 Speed Limit 40		118a																																																																																																		
01	2 Police Dept of LAKEWOOD TOWNSHIP #01										At Intersection With Road Name Dir										12 Route No. Suffix 13 Milepost		118b																																																																																																		
01	3 Station/Precinct										☒ Feet ☐ N ☒ E of: NEW HAMPSHIRE AVENUE										18 Speed Limit		-																																																																																																		
05	4 Date of Crash mm dd yy 03/18/22										5 Day Of Week FRIDAY										6 Time (use 2400 hrs) 1132										7 Municipality Code 1514										8 Total Killed --										9 Total Injured --										19 Ramp To From: --										17 Cross Road Name										20 Route/Name										21 Latitude										22 Longitude										NB ☐ EB ☐ SB ☐ WB										119a
01	23 Veh # 1										24 Policy No. 8038213										25 NJ Ins. Code 096										53 Veh #										54 Policy No.										55 NJ Ins. Code										119b																																																												
04	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										120a																																																																																																				
02	26 Driver's First Name Initial Last Name CHRISTOPH A REID										29 Sex M										56 Driver's First Name Initial Last Name										59 Sex										120b																																																																																
01	27 Number & Street 55 NORTHRUP DR APT 55										57 Number & Street										121a																																																																																																				
01	28 City BRICK										State Zip NJ 08724										58 City										State Zip										121b																																																																																
1	30 Eyes DL Class Restrictions Endorsements 02 D										31 State NJ										60 Eyes DL Class Restrictions Endorsements										61 State										122																																																																																
105	32 Driver's License Number R22561246103752										33 DOB mm dd yyyy 03/21/1975										34 Expires mm yy 03 25										62 Driver's License Number										63 DOB mm dd yyyy										64 Expires mm yy										01																																																												
11	35 Owner's First Name Initial Last Name CHRISTOPH A REID										65 Owner's First Name Initial Last Name										123																																																																																																				
106	36 Number & Street 55 NORTHRUP DR APT 55										66 Number & Street										124																																																																																																				
107	37 City BRICK										State Zip NJ 08724										67 City										State Zip										125																																																																																
01	38 Make NISS										39 Model ROG										40 Color BLK										41 Year 2008										42 Plate No. P74PGU										43 State NJ										68 Make										69 Model										70 Color										71 Year										72 Plate No.										73 State										52
109	44 VIN JN8AS58T38W001618										45 Expires mm yy 11 22										74 VIN										75 Expires										126a																																																																																
01	46 Vehicle Removed To BARINA'S AUTOMOTIVE										76 Vehicle Removed To										126b																																																																																																				
110	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded										☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										126c																																																																																																				
111	☐ Left At Scene ☐ Towed Impounded										☐ Left At Scene ☐ Towed Impounded										126d																																																																																																				
112	47 Authority ☐ Owner ☐ Driver ☒ Police										77 Authority ☐ Owner ☐ Driver ☐ Police										126e																																																																																																				
113	48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. -- % ☐ Pending										49 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class Placard No.										78 Alcohol/Drug Test Given: ☐ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. -- % ☐ Pending										79 Hazardous Material ☐ None ☐ On Board ☐ Spill Hazard Class Placard No.										52																																																																																
114	50 Carrier No. ☐ USDOT ☐ MC/MX ☒ None										51 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No. ☐ USDOT ☐ MC/MX ☐ None										81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										127a																																																																																
04	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity										127b																																																																																																				
115	Number & Street										Number & Street										127c																																																																																																				
116	City										State Zip										City										State Zip										127d																																																																																
117	135 Damage To Other Property ☒ Yes (If Yes, describe) ☐ No										136 Charge										137 Summons. No.										138 Charge										139 Summons. No.										127e																																																																						
118	POLE # BT101										140 Charge										141 Summons. No.										142 Charge										143 Summons. No.										128																																																																						
119	83 84 85 86 87 88 89 90 91 92 93 94 95										Names & Addresses of Occupants - If Deceased, Date & Time of Death										129																																																																																																				
01	01 01 01 05 46 M - - - 11 04 01 -										CHRISTOPH A REID 55 NORTHRUP DR APT 5: BRICK NJ 08724 -										130																																																																																																				
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New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-020951

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 was traveling west on Ocean Avenue. Driver 1 stated he went to reach for his cell phone, he believed was in his center console, however it had fallen in between his seats. As he went to reach for his cell phone, his car moved to the right resulting in him striking the utility pole.

Driver 1 was offered medical attention which he declined on scene.

Vehicle 1 had damage to the fender and the hood and front airbag deployment . Vehicle was towed by Barina's Towing located at 160 Ocean Avenue in Lakewood, New Jersey.

146 Officer's Signature

ESMART A

147 Badge #

402

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending☒ Complete

96	PAGE	1	OF	2	☐ Fatal	New Jersey Police Crash Investigation Report										☒ Reportable	☐ Non-Reportable	☐ Change Report																																																																																																																				
05	1 Case Number	22-020953										10 Crash Occurred On:	SOMERSET AVE										11 Speed Limit	25	118a	20																																																																																																												
01	2 Police Dept of	LAKEWOOD TOWNSHIP 01										Code	01	At Intersection With	RIDGE AVE										12 Route No.		13 Milepost	25	118b	-																																																																																																								
01	3 Station/Predict											14	15	16	17 Cross Road Name											18 Speed Limit	25	119a	-																																																																																																									
07	4 Date of Crash	03/18/22										5 Day Of Week	FRIDAY										6 Time (use 2400 hrs)	1108	7 Municipality Code	1514	8 Total Killed	--	9 Total Injured	--	119b	-																																																																																																						
100a	23 Veh #	1										24 Policy No.	6046933962061										25 NJ Ins. Code	884	53 Veh #	-	54 Policy No.	-	55 NJ Ins. Code	-	120a	01																																																																																																						
04		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run												☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run																120b	-																																																																																																							
02	26 Driver's First Name	RACHEL										Initial	-	Last Name	NUSSBAUM										29 Sex	F	56 Driver's First Name											59 Sex	-	121a	-																																																																																													
02	27 Number & Street	665 DAHILL RD																				57 Number & Street											121b	-																																																																																																				
01	28 City	BROOKLYN										State	NY	Zip	11218										58 City											State	-	Zip	-																																																																																															
104	30 Eyes	2										DL Class	D										Restrictions	-	Endorsements	-	31 State	NY										60 Eyes											DL Class	-	Restrictions	-	Endorsements	-	61 State	-	122	01																																																																												
11	32 Driver's License Number	132533341										33 DOB	03/03/1998										34 Expires	03 24										62 Driver's License Number											63 DOB											64 Expires											123	-																																																																		
106	35 Owner's First Name	CHAIM										Initial	-	Last Name	LURIA										65 Owner's First Name											Initial	-	Last Name											124	-																																																																																				
107	36 Number & Street	26 E 9TH ST																				66 Number & Street											125	-																																																																																																				
01	37 City	LAKEWOOD										State	NJ										Zip	08701										67 City											State	-	Zip	-	126a	-																																																																																				
109	38 Make	HYUN										39 Model	SON										40 Color	3										41 Year	2009										42 Plate No.	R92DSV										43 State	NJ										68 Make											69 Model											70 Color											71 Year											72 Plate No.											73 State											126b	05
01	44 VIN	5NPET46C89H530383										45 Expires	11 22										74 VIN											75 Expires											126c	56																																																																																								
111	46 Vehicle Removed To	MOSHY																				76 Vehicle Removed To											126d	-																																																																																																				
112	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded											☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded											126e	-																																																																																																														
113	47 Authority	☐ Owner ☒ Driver ☐ Police																				77 Authority	☐ Owner ☐ Driver ☐ Police																				126f	56																																																																																										
114	48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused																				78 Alcohol/Drug Test	Given: ☐ No ☐ Yes ☐ Refused																				127a	-																																																																																										
115	Type: ☐ Breath ☐ Blood ☐ Urine																					Type: ☐ Breath ☐ Blood ☐ Urine																					127b	-																																																																																										
116	Results: 0. - % ☐ Pending																					Results: 0. - % ☐ Pending																					127c	-																																																																																										
01	50 Carrier No.	☐ USDOT ☒ None																				51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No.	☐ USDOT ☐ MC/MX ☐ None																				81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										127d	-																																																																				
117	52 Motor Carrier or Government Entity																					82 Motor Carrier or Government Entity											127e	-																																																																																																				
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	City											State											Zip											City											State	-	Zip	-	129	12																																																																																				
	135 Damage To Other Property	☒ Yes (If Yes, describe) ☐ No																				130	12																																																																																																															
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	Oper. 140 Charge											141 Summons. No.											Oper. 142 Charge											143 Summons. No.											133	-																																																																																								
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	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death																																																																																																																								
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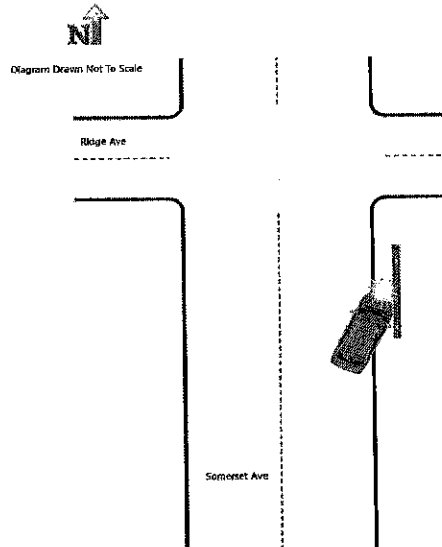
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-020953**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated she was driving North on Somerset Avenue. Driver of vehicle 1 stated she took her eyes off of the road to look at her GPS. Driver of vehicle 1 stated when she looked up she struck Utility Pole #BT2646LD. Vehicle 1 had heavy front end damage disabling it. Vehicle 1 had front airbag deployment. Driver of vehicle 1 had no complaint of pain. Vehicle 1 was towed by Moshys.

146 Officer's Signature

ORTIZ, K

147 Badge #

377

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending☒ Complete

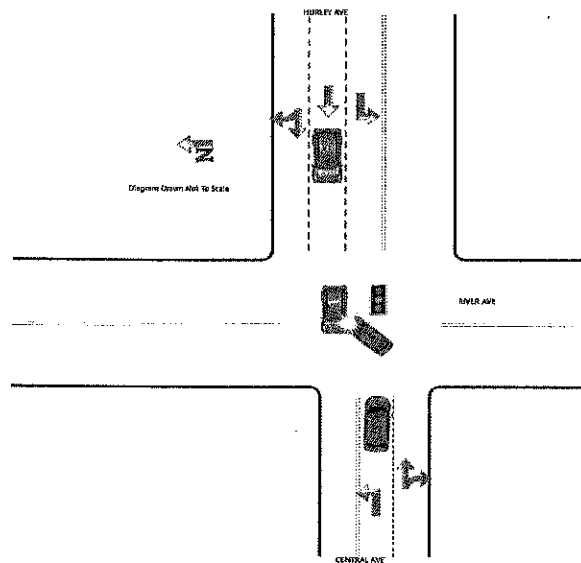
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-020997**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
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J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated she was Westbound on Hurley Ave and was approaching the intersection of River Ave. She stated as she was going forward crossing over River Ave, vehicle 2 turned left in front of her and crashed into her vehicle.

Driver of vehicle 2 stated he was Eastbound on Central Ave and was stopped waiting to make a left turn onto Route 9. He stated as he was waiting the light turned yellow and he started to turn. He stated as he turned vehicle 1 crashed into his vehicle.

In my investigation I find vehicle 2 at fault for driver inattention and failure to yield to vehicle 1 as vehicle 2 needs to make sure it safe before attempting to turn.

146 Officer's Signature

SORIANO J

147 Badge #

352

148 Reviewer

JP

Badge #

283

149 Case Status

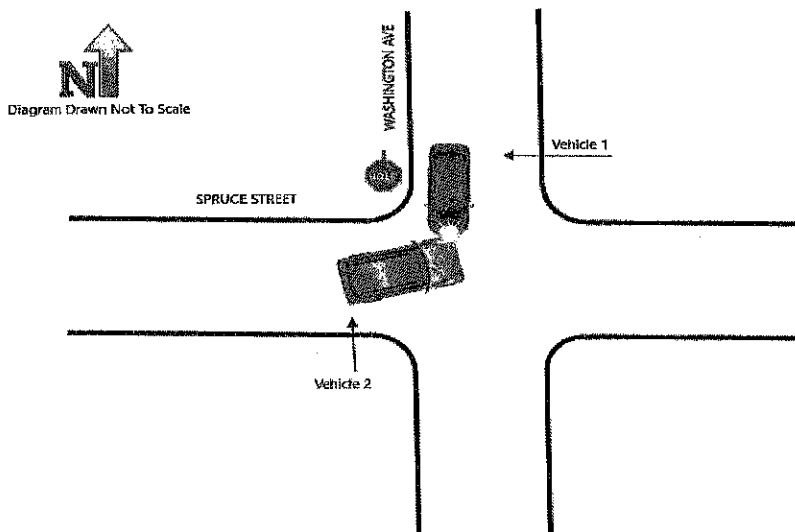
☐ Pending ☒ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-020999

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of Vehicle 1 stated he was making a right hand turn from Washington Ave on to Spruce Street when his vehicle collided with Vehicle 2. Vehicle 1 sustained disabling damage to the drivers side front bumper.

Vehicle 1 was impounded for being unregistered by Barina Automotive.

The driver of Vehicle 2 she was making a left hand turn from Spruce Street on to Washington Avenue when Vehicle 1 came through the stop sign and collided into her vehicle. Vehicle 1 sustained damage to the drivers side front bumper/headlight area.

Based on my observations and statements provided by both drivers, Vehicle 1 is at fault for the crash.

No injuries were reported.

Vehicle 1 Insurance Information: FS-20 New York State Insurance Identification
743 Allstate Fire and Casualty Insurance Company
1125 RXR Plaza, Suite 1100E
Uniondale, NY 11556
(800)255-7828
Police #: 000000978581403

146 Officer's Signature

RUSK J

147 Badge #

388

148 Reviewer

DIBIASE

Badge #

286

149 Case Status

☐ Pending ☒ Complete

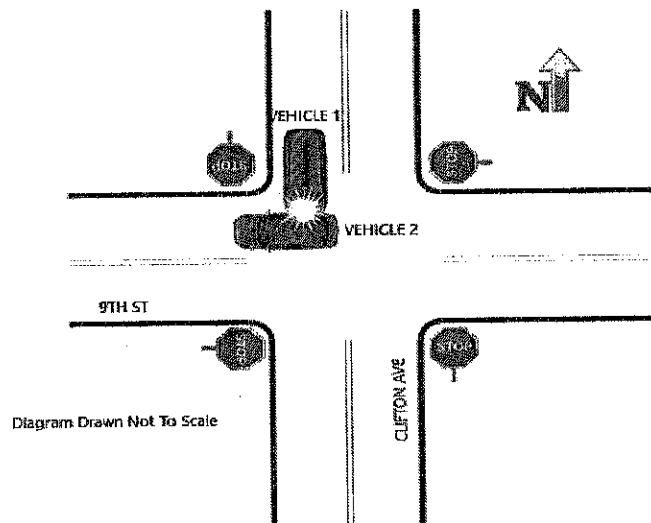
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: - Case No: **22-021001**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	
	2	06	01	05	2	F	-	-	-	05	05	-	-	RIVKA - GARTNER 122 VILLAGE PATH LAKEWOOD NJ 08701 - -

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of Vehicle 1 stated he was travelling south on Clifton Ave entering the intersection of 9th St after stopping at the four way stop sign when he struck Vehicle 2, which was travelling west on 9th St and Clifton Ave. Driver of Vehicle 1 stated driver of Vehicle 2 had already stopped at the four way stop sign and entered the intersection prior to driver of Vehicle 1 stopping at the stop sign. Driver of Vehicle 2 reported the same following events occurred.

Vehicle 1 sustained minor damages to its front bumper area and vehicle 2 sustained minor damages to its rear passenger side area, consisting of denting to the rear passenger door.

From my investigation, I concluded that driver of vehicle 1 was at fault for failing to yield to Vehicle 2.

146 Officer's Signature
K. SEEHAUSEN

147 Badge #
416

148 Reviewer
DIBIASE

Badge #
286

149 Case Status
☐ Pending ☒ Complete

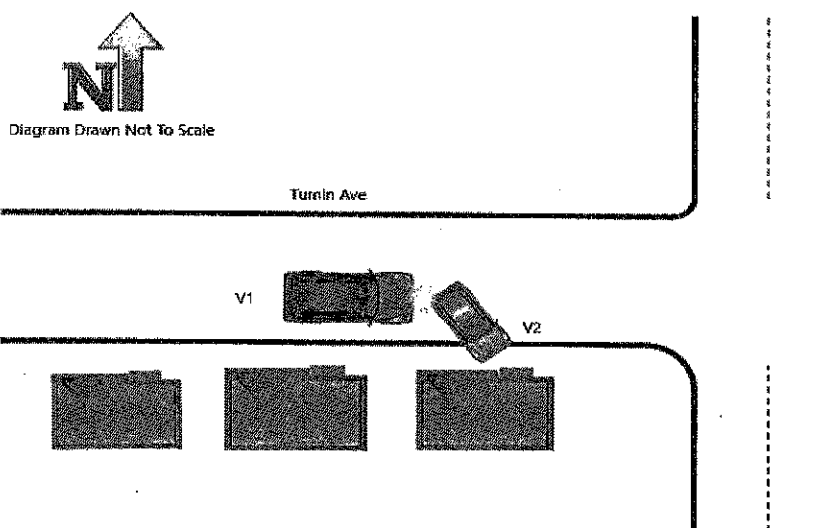
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-021019**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of Vehicle 1 was not on scene to provide a statement.

The driver of Vehicle 2 stated he was backing out of the driveway of 36 Turin Avenue when he saw a Amazon Truck driving east towards him down the block while honking. Driver 2 stated he continued to back out of the driveway and both the Amazon truck and he stopped in the middle of the street without colliding. Then, the driver of the amazon truck became angry and drove forward into the rear of Vehicle 2. Vehicle 2 had very minimal damage to the rear bumper of the vehicle.

The description provided of the driver of the Amazon truck was a skinny black male wearing a dark colored shirt and black pants.

No injuries were reported.

146 Officer's Signature

RUSK J

147 Badge #

388

148 Reviewer

JP

Badge #

283

149 Case Status

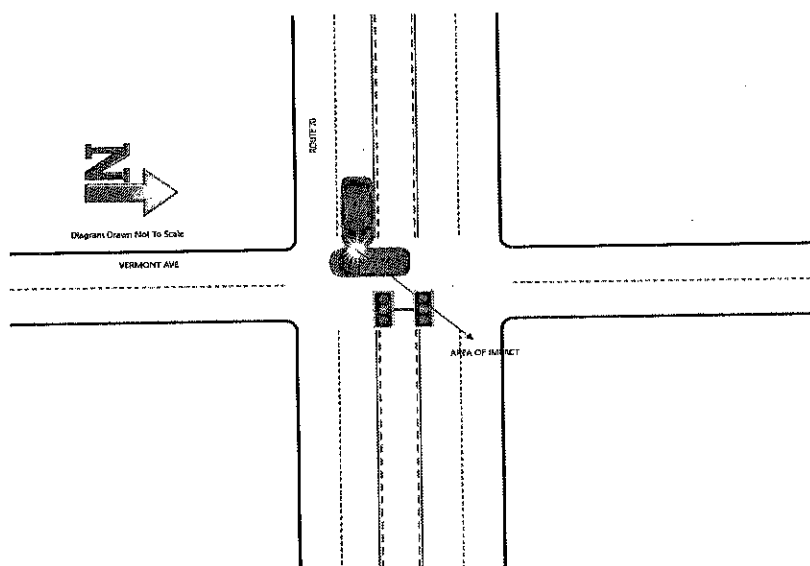
☒ Pending ☐ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**
Station: _____ Case No: **22-021177**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

WHEN I ARRIVED BOTH VEHICLES WERE ON THE SIDE OF THE ROAD. VEHICLE 1 HAD EXTENSIVE DAMAGE TO THE FRONT BUMPER AND FRONT PASSENGER SIDE. VEHICLE 2 HAD DISABLING DAMAGE TO THE PASSENGER SIDE FRONT AND REAR DOORS.

DRIVER OF VEHICLE 1 STATED SHE DOESNT REMEMBER WHAT HAPPENED BUT STATED THAT SHE THOUGHT THE LIGHT WAS YELLOW. SHE SAID SHE WAS HEADING EAST ON ROUTE 70, IN THE FAR LEFT LANE, THEN CRASHED INTO VEHICLE 2. SHE WAS VERY DISORIENTED AFTER THE ACCIDENT.

DRIVER OF VEHICLE 2 STATED SHE STOPPED AT THE RED LIGHT HEADING SOUTH ON VERMONT AVE. IN THE FAR RIGHT LANE. SHE STATED A MOTORCYCLE WAS TO THE LEFT OF HER. THE LIGHT TURNED GREEN TO WHICH SHE STATED SHE PROCEEDED FORWARD. AS SHE PROCEEDED FORWARD SHE STATED VEHICLE 1 STRUCK HER VEHICLE.

THERE WERE NO INJURIES AND BARINA TOWING TOWED VEHICLE 2 FOR DIABLING DAMAGE.

BASED ON MY INVESTIGATION, DRIVER OF VEHICLE 1 WAS AT FAULT DUE TO FAILING TO YIELD TO VEHICLE 2.

146 Officer's Signature

GIBSON M

147 Badge #

409

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending ☒ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-021339**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	
	02	06	01	05	01	F	-	-	-	05	05	-	-	BLUMA - PIOTRKOVSKI 22 NATURES WAY LAKEWOOD NJ 08701 -

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

On 3/19/2022 at approximately 2212hrs, I was traveling East on Central Avenue when I heard a crash occur right behind my patrol vehicle involving two motor vehicles. I then met with the driver of vehicle 2 who was identified as Yitzchak Piotrkovski. Mr. Piotrkovski reported that while he was stopped in traffic on Central Avenue, his vehicle was suddenly struck by vehicle 1.

I then met with the driver of vehicle 1 who was identified as Nathan Rottenberg. Mr. Rottenberg reported that while he was traveling East on Central Avenue, he was unsure if vehicle 2 had suddenly stopped or not. Mr. Rottenberg did state that he may have "spaced out" prior to the crash.

Hatzolah arrived on scene as a precaution but there were no injuries reported at the scene of the crash.

Vehicle 1 sustained moderate front end damage.

Vehicle 2 sustained moderate rear end damage.

146 Officer's Signature

SHEEHAN, M

147 Badge #

423

148 Reviewer

SGT. J. SPAGNUOLO

Badge #

331

149 Case Status

☐ Pending☒ Complete

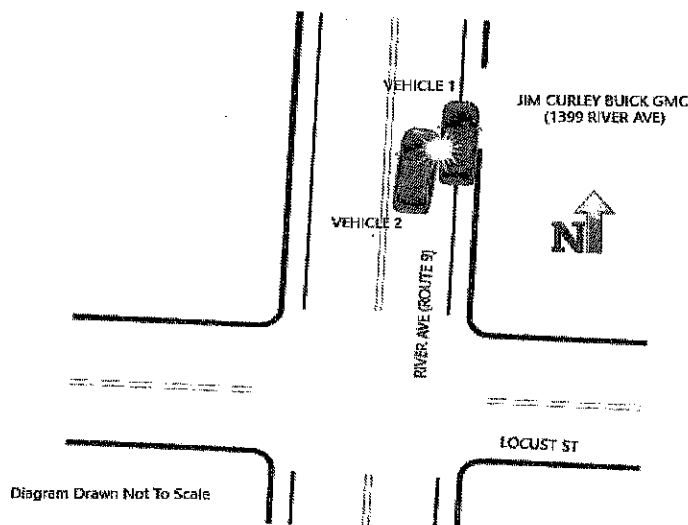
96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																	
05	1 Case Number				22-021346										11 Speed Limit		45		0009		118a																																															
97	2 Police Dept of				Code		LAKEWOOD TOWNSHIP F01										12 Route No.		Suffix		13 Milepost		118b																																													
01	3 Station/Precinct				Code		50										14		15		16		18 Speed Limit		35																																											
07	4 Date of Crash				5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		21 Latitude		22 Longitude		25																																																	
02	03/19/22				SATURDAY		2229		1514		--		--		40.048000		-74.221710		119a																																																	
100a	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code				01																																											
04	1				952823767				136				2				AOS-221-126644-701				-				120b																																											
101	☐ Parked				☐ Ped				☐ Pedalcyclist				☐ Resp To Emergency				☐ Hlt & Run				☐ Parked				☐ Ped				☐ Pedalcyclist				☐ Resp To Emergency				☐ Hlt & Run																															
02	26 Driver's First Name				Initial				Last Name				29 Sex				56 Driver's First Name				Initial				Last Name				59 Sex				121a																																			
102	DEREL				M				STROUD				-				M				JAY				-				STARESHEFSKY				-				M				01																											
02	27 Number & Street				28 City				State				Zip				57 Number & Street				58 City				State				Zip				121b																																			
103	74 WINDING RIDGE DR				NEPTUNE				NJ				07753				2420 AVENUE L				BROOKLYN				NY				11210																																							
02	30 Eyes				DL Class				Restrictions				Endorsements				31 State				60 Eyes				DL Class				Restrictions				Endorsements				61 State				122																											
104	02				D				-				-				NJ				04				-				-				-				NY				01																											
02	32 Driver's License Number				33 DOB				34 Expires				62 Driver's License Number				63 DOB				64 Expires				123																																											
105	S83741647410852				10/15/1985				10				25				444229913				02/03/1947				02				27				02																																			
02	35 Owner's First Name				Initial				Last Name				65 Owner's First Name				Initial				Last Name				124																																											
106	☐ Same As Driver				DEREL				M				STROUD				☐ Same As Driver				MINDY				C				STARESHEFSKY				-				04																															
02	36 Number & Street				37 City				State				Zip				66 Number & Street				67 City				State				Zip				125																																			
107	74 WINDING RIDGE DR				NEPTUNE				NJ				07753				2420 AVENUE L				BROOKLYN				NY				11210				04																																			
01	38 Make				39 Model				40 Color				41 Year				42 Plate No.				43 State				126a																																											
109	01				FORD				FUS				BLU				2016				D69LRX				NJ				26																																							
01	44 VIN				45 Expires				74 VIN				75 Expires				126b																																																			
110	01				3FA6P0G74GR333374				09				22				5XXGU4L36JG264730				08				22				-																																							
01	46 Vehicle Removed To				76 Vehicle Removed To				126c																																																											
111	☒ Driven				☐ Towed Disabled				☐ Towed Disabled & Impounded				☒ Driven				☐ Towed Disabled				☐ Towed Disabled & Impounded				126d																																											
01	☐ Left At Scene				☐ Towed Impounded				☐ Left At Scene				☐ Towed Impounded				126e																																																			
112	47 Authority				77 Authority				126f																																																											
113	☐ Owner				☒ Driver				☐ Police				☒ Owner				☐ Driver				☐ Police				26																																											
01	48 Alcohol/Drug Test				49 Hazardous Material				78 Alcohol/Drug Test				79 Hazardous Material				127a																																																			
114	Given: ☒ No ☐ Yes ☐ Refused				☒ None ☐ On Board ☐ Spill				Given: ☒ No ☐ Yes ☐ Refused				☒ None ☐ On Board ☐ Spill				26																																																			
115	Type: ☐ Breath ☐ Blood ☐ Urine				Type: ☐ Breath ☐ Blood ☐ Urine				Type: ☐ Breath ☐ Blood ☐ Urine				Type: ☐ Breath ☐ Blood ☐ Urine				127b																																																			
01	Results: 0, - % ☐ Pending				Hazard Class				Placard No.				Results: 0, - % ☐ Pending				Hazard Class				Placard No.				127c																																											
116	50 Carrier No.				51 GVWR/GCWR				80 Carrier No.				81 GVWR/GCWR				127d																																																			
01	☐ USDOT				☐ Weight <= 10,000 lbs				☐ USDOT				☐ Weight <= 10,000 lbs				127e																																																			
01	☐ MC/MX				☐ Weight 10,001-26,000 lbs				☐ MC/MX				☐ Weight 10,001-26,000 lbs				26																																																			
	☐ Weight >= 26,001 lbs				☐ Weight >= 26,001 lbs				☐ Weight >= 26,001 lbs				☐ Weight >= 26,001 lbs				128																																																			
	52 Motor Carrier or Government Entity				82 Motor Carrier or Government Entity				129																																																											
	Number & Street				Number & Street				130																																																											
	City				City				131																																																											
	State				State				132																																																											
	Zip				Zip				133																																																											
	135 Damage To Other Property				☐ Yes (If Yes, describe)				☒ No				134																																																							
	Oper.				136 Charge				137 Summons. No.				Oper.				138 Charge				139 Summons. No.				02																																											
	Oper.				140 Charge				141 Summons. No.				Oper.				142 Charge				143 Summons. No.				02																																											
	83				84				85				86				87				88				89				90				91				92				93				94				95				Names & Addresses of Occupants - If Deceased, Date & Time of Death		02													
A	1				01				01				05				36				M				-				-				-				11				04				-				-				DEREL		M				STROUD				-					
B	1				03				01				05				30				M				-				-				-				11				04				-				-				JAMIL		-				MORRIS				-					
C	2				01				01				05				75				M				-				-				-				11				04				-				-				JAY		-				STARESHEFSKY				-					
D	2				03				01				05				73				F				-				-				-				11				04				-				-				MINDY		C				STARESHEFSKY				-					
																																																					2420 AVENUE L		BROOKLYN				NY				11210				-	

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-021346**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	
	2	04	01	05	34	M	-	-	-	11	04	-	-	AVROHOM - STARESHEFSKY 2420 AVENUE L BROOKLYN NY 11210 -

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of Vehicle 1 stated while traveling north on River Ave behind Vehicle 2, Vehicle 2 had stopped in the roadway without reason and was idling when driver of Vehicle 1 attempted to pass Vehicle 2 on the shoulder. While passing, Vehicle 2 attempted to turn, still traveling north, into 1399 River Ave without signaling, resulting in Vehicle 1 striking Vehicle 2.

Driver of Vehicle 2 stated while traveling north on River Ave, he slowed down due to not knowing the area very well, and began turning onto 1399 River Ave. While turning, Vehicle 1 was passing, causing Vehicle 1 to strike Vehicle 2. Driver of Vehicle 2 does not recall whether he activated his turn signal prior to turning.

Vehicle 1 sustained minor damages consisting of scratches on the driver side rear passenger door. Vehicle 2 sustained minor damages consisting of scratches on the panel above the front passenger wheel.

From my investigation, I concluded that driver of Vehicle 1 was at fault for improperly passing.

*Box 55 - NJ Ins. Code - Vehicle 2's insurance is out of New York, Policy Code 618, Liberty Mutual General Insurance.

146 Officer's Signature

K. SEEHAUSEN

147 Badge #

416

148 Reviewer

DIBIASE

Badge #

286

149 Case Status

☐ Pending ☒ Complete

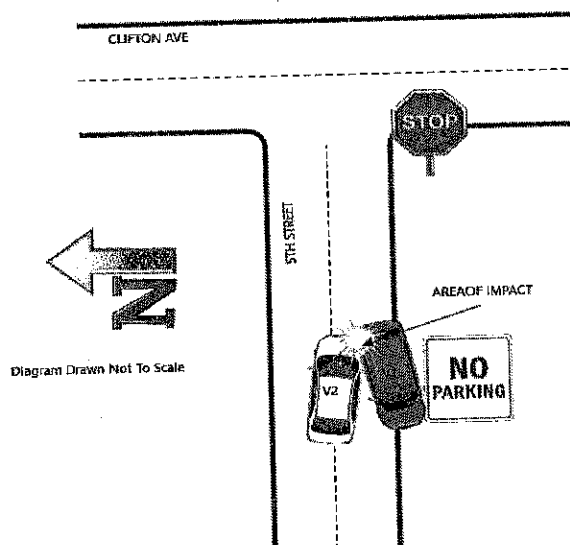
PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
05	1 Case Number 22-021453		10 Crash Occurred On: 5TH ST		11 Speed Limit 25
01	2 Police Dept of LAKEWOOD TOWNSHIP		3 Station/Precinct 01		12 Route No. 13 Milepost
01	4 Date of Crash 03/20/22		5 Day Of Week SUNDAY		14 15 16
07	6 Time (use 2400 hrs) 1011		7 Municipality Code 1514		8 Total Killed --
100a	9 Total Injured --		21 Latitude 40.09506		22 Longitude -74.21517
04	23 Veh # 1		24 Policy No. 4461333785		25 NJ Ins. Code 148
02	26 Driver's First Name BENJAMIN		27 Number & Street 31 FOREST PARK CIRCLE		28 City LAKEWOOD
01	29 Sex M		30 Eyes 2		31 State NJ
01	32 Driver's License Number N40240820001692		33 DOB 01/18/1969		34 Expires 01/23
2	35 Owner's First Name BENJAMIN		36 Number & Street 31 FOREST PARK CIRCLE		37 City LAKEWOOD
105	38 Make TOYT		39 Model SIE		40 Color GRY
02	41 Year 2018		42 Plate No. L47MYS		43 State NJ
106	44 VIN 5TDXZ3DC8JS916420		45 Expires 10/22		46 Vehicle Removed To
107	47 Authority Owner		48 Alcohol/Drug Test No		49 Hazardous Material None
108	50 Carrier No. None		51 GVWR/GCWR Weight <= 10,000 lbs		52 Motor Carrier or Government Entity
109	53 Veh # 2		54 Policy No. F100542729		55 NJ Ins. Code 426
110	56 Driver's First Name LISA		57 Number & Street 30 BENNETT ST		58 City FREEHOLD
111	59 Sex F		60 Eyes 2		61 State NJ
112	62 Driver's License Number H27434767461712		63 DOB 11/16/1971		64 Expires 11/23
113	65 Owner's First Name LISA		66 Number & Street 30 BENNETT ST		67 City FREEHOLD
114	68 Make HOND		69 Model ACC		70 Color WHI
115	71 Year 2005		72 Plate No. V32JLH		73 State NJ
116	74 VIN 1HGCM66555A019377		75 Expires 11/22		76 Vehicle Removed To
117	77 Authority Owner		78 Alcohol/Drug Test No		79 Hazardous Material None
118	80 Carrier No. None		81 GVWR/GCWR Weight <= 10,000 lbs		82 Motor Carrier or Government Entity
119	83		84		85
120	86		87		88
121	89		90		91
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123	95		96		97
124	98		99		100
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127	107		108		109
128	110		111		112
129	113		114		115
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135	131		132		133
136	134		135		136
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170	236		237		238
171	239		240		241
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174	248		249		250
175	251		252		253
176	254		255		256</

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-021453

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
	83	84	85	86	87	88	89	90	91	92	93	94	95	
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

WHEN I ARRIVED BOTH VEHICLES WERE PARKED ON THE SIDE OF 5TH STREET. VEHICLE 1 HAD MODERATE DAMAGE WITH DENTS ON THE REAR PASSENGER SIDE OF THE VEHICLE. VEHICLE 2 HAD MODERATE DAMAGE WITH DENTS AND SCRATCHES ON THE FRONT PASSENGERS SIDE BUMPER.

DRIVER OF VEHICLE 1 WAS PARKED FACING WEST ON 5TH STREET, WHEN VEHICLE 2 STRUCK THE REAR PASSENGER SIDE OF HIS VEHICLE. THERE WERE NO INJURIES.

DRIVER OF VEHICLE 1 WAS PARKED IN A NO PARKING ZONE WITH HIS VEHICLE FACING WEST IN THE EASTBOUND LANE OF 5TH STREET. HIS VEHICLE WAS SLANTED OUT AND NOT STRAIGHT.

DRIVER OF VEHICLE 2 STATED SHE WAS DRIVING EAST ON 5TH STREET WHEN ANOTHER VEHICLE WAS DRIVING WEST COMING TOWARDS HER DIRECTION. IN ORDER TO AVOID CONTACT WITH THAT VEHICLE SHE MOVED TO THE SIDE, TO WHICH SHE STRUCK VEHICLE 1 WHICH WAS PARKED.

BASED ON MY INVESTIGATION, BOTH DRIVERS ARE AT FAULT. VEHICLE 1 IS AT FAULT FOR IMPROPER PARKING. VEHICLE 2 IS AT FAULT FOR DRIVER INATTENTION NOT SEEING PARKED VEHICLE 1.

146 Officer's Signature

GIBSON M

147 badge #

409

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending☒ Complete

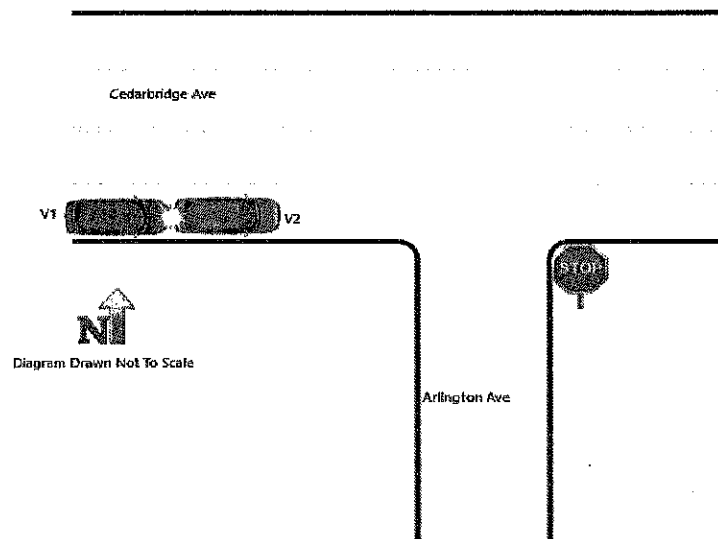
New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
 Station: - Case No: 22-021490

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
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F														
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N														
V														
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H														
V														
E														
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D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 was traveling Eastbound on Cedarbridge Ave in the right lane and crashed into the rear of vehicle 2 which was also traveling Eastbound on Cedarbridge Ave.

Driver 1 stated she was traveling Eastbound on Cedarbridge Ave in the right lane when she crashed into the rear of vehicle 2. She stated she does not know why this happened.

Driver 2 stated she was traveling Eastbound on Cedarbridge Ave in the right lane when vehicle 1 crashed into the rear of her vehicle.

Driver 1 had a small cut on her forehead and was going to be checked out at Monmouth Medical Center Southern Campus. Both vehicles sustained moderate damage.

Based on my observations and speaking with both parties, I determined that driver 1 was at fault for failing to avoid crashing into the back of vehicle 2.

Vehicle 1 has New York insurance and the information is as follows; Progressive Casualty Insurance Company 6300 Wilson Mills Rd Mayfield Village Ohio, 44143 Policy number 63482213

146 Officer's Signature
GARRETSON C

147 Badge #
391

148 Reviewer
PA

Badge #
325

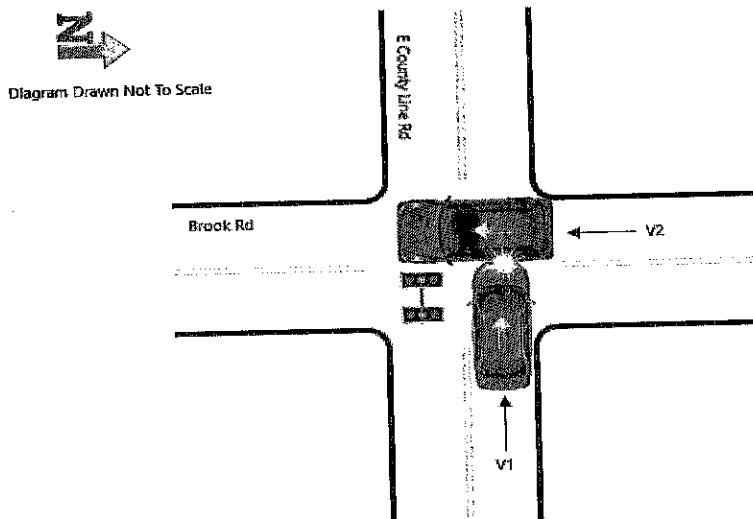
149 Case Status
☐ Pending ☒ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-021499**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated he was traveling west on E County Line Rd, and he had the green light to go through the intersection of Brook Rd. Driver of vehicle 1 stated as he crossed into the intersection, vehicle 2 pulled out in front of him, which resulted in the crash.

Driver of vehicle 2 stated he was southbound on Brook Rd and stopped at the light. Driver of vehicle 2 stated he thought he saw the light turn green, so he proceeded to drive into the intersection of E county Line Rd. Driver of vehicle 2 stated his vehicle was then struck by vehicle 1. Driver of vehicle 2 stated after the crash he looked at the light and realized he actually had the red light and made a mistake.

As a result of my investigation, I, Ptl. Livingston #373 determined the driver of vehicle 2 is at fault for this crash. Driver of vehicle 2 failed to obey the traffic signal.

146 Officer's Signature
LIVINGSTON M147 Badge #
373148 Reviewer
PABadge #
325149 Case Status
☐ Pending ☒ Complete

96	PAGE	1	OF	2	☐ Fatal	New Jersey Police Crash Investigation Report										☒ Reportable	☐ Non-Reportable	☐ Change Report																																																																																																																			
05	1 Case Number	22-021524										11 Speed Limit	35						118a																																																																																																																		
97	2 Police Dept of	LAKEWOOD TOWNSHIP F01										10 Crash Occurred On:	S LAKE DR											57																																																																																																													
01	3 Station/Precinct											11 At Intersection With	GOBAR WAY										12 Route No.		13 Milepost	25	118b																																																																																																										
98	4 Date of Crash	mm		dd		yy		5 Day Of Week	SUNDAY										14	15	16	17 Cross Road Name											18 Speed Limit	25	119a																																																																																																		
01	6 Time (use 2400 hrs)	mm		dd		yy		7 Municipality Code	1514										8 Total Killed											9 Total Injured	1										21 Latitude	40.09311										22 Longitude	-74.23373										119b																																																																						
07	23 Veh #	1										24 Policy No.	939 572 321										25 NJ Ins. Code	054										53 Veh #	2										54 Policy No.	HC2E-ADR-3607A923										55 NJ Ins. Code	612										120a																																																																		
04	26 Driver's First Name	FRUMAH										Initial	C										Last Name	MIZRAHI										29 Sex	F										56 Driver's First Name	CHANOCH										Initial	Y										Last Name	SUSSMAN										59 Sex	M										120b																																												
01	27 Number & Street	3 LEHIGH BLVD										State	NJ										Zip	08527										57 Number & Street	93 FOREST DR										State	NJ										Zip	08701										121a																																																																		
01	28 City	JACKSON										State	NJ										Zip	08527										58 City	LAKEWOOD										State	NJ										Zip	08701										121b																																																																		
02	30 Eyes	4										DL Class	A										Restrictions											Endorsements											31 State	NJ										60 Eyes	4										DL Class	D										Restrictions											Endorsements											61 State	NJ										122																						
01	32 Driver's License Number	M47722706351884										33 DOB	mm		dd		yyyy		34 Expires	mm		yy		62 Driver's License Number	S94571208812014										63 DOB	mm		dd		yyyy		64 Expires	mm		yy		123																																																																																						
01	35 Owner's First Name	AHARON										Initial	M										Last Name	MIZRAHI										65 Owner's First Name											Initial											Last Name	PAG NEW JERSEY J -										124																																																																		
01	36 Number & Street	3 LEHIGH BLVD										State	NJ										Zip	08527										66 Number & Street	105 HWY 36										State	NJ										Zip	07724										125																																																																		
01	37 City	JACKSON										State	NJ										Zip	08527										67 City	EATONTOWN										State	NJ										Zip	07724										126a																																																																		
01	38 Make	HOND										39 Model	ODY - OD										40 Color	BLU										41 Year	2009										42 Plate No.	P64MMS										43 State	NJ										68 Make	ROVE										69 Model	DIS										70 Color	BLU										71 Year	2020										72 Plate No.	W51GAZ										73 State	NJ										126b
01	44 VIN	5FNRL38719B019754										45 Expires	mm		yy		74 VIN	SALCJ2FX9LH878261										75 Expires	mm		yy		126c																																																																																																				
01	46 Vehicle Removed To	MOISHY'S TOWING										47 Authority	☒ Owner ☒ Driver ☐ Police										76 Vehicle Removed To											77 Authority	☒ Owner ☒ Driver ☐ Police										126d																																																																																								
01	48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused										49 Hazardous Material	☒ None ☐ On Board ☐ Spill										78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused										79 Hazardous Material	☒ None ☐ On Board ☐ Spill										126e																																																																																								
04	50 Carrier No.	☐ USDOT ☒ None										51 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No.	☐ USDOT ☒ None										81 GVWR/GCWR	☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										127a																																																																																								
04	52 Motor Carrier or Government Entity											82 Motor Carrier or Government Entity											127b																																																																																																														
04	Number & Street											83 Number & Street											127c																																																																																																														
04	City											84 City											127d																																																																																																														
04	State											85 State											127e																																																																																																														
04	Zip											86 Zip											127f																																																																																																														
04	135 Damage To Other Property	☐ Yes (If Yes, describe) ☒ No										136 Charge											137 Summons. No.											138 Charge											139 Summons. No.											128																																																																													
04	140 Charge											141 Summons. No.											142 Charge											143 Summons. No.											129																																																																																								
04	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death										130																																																																																																													
A	V1	01	01	05	34	F	-	-	-	11	04	-	-	FRUMAH C MIZRAHI 3 LEHIGH BLVD JACKSON NJ 08527										131																																																																																																													
B	V1	03	01	05	11	M	-	-	-	11	04	-	-	ELIYAH MIZRAHI 3 LEHIGH BLVD JACKSON NJ 08527										132																																																																																																													
C	V1	04	01	05	1	F	-	-	-	06	06	-	-	RINA MIZRAHI 3 LEHIGH BLVD JACKSON NJ 08527										133																																																																																																													
D	V1	05	01	05	11	M	-	-	-	11	04	-	-	CHAIM MIZRAHI 3 LEHIGH BLVD JACKSON NJ 08527										134																																																																																																													

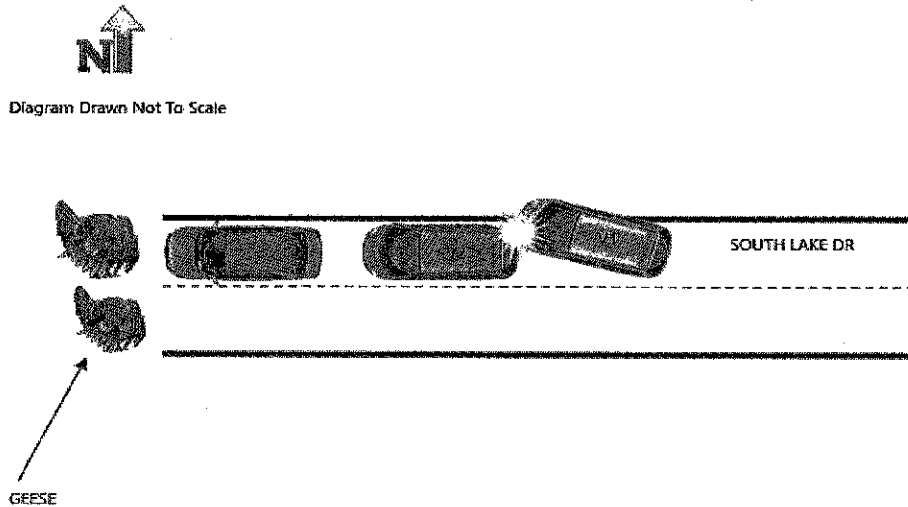
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-021524**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death		
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95			
	V1	06	01	05	7	M	-	-	-	11	04	-	-	NAFTALI	-	MIZRAHI
														3 LEHIGH BLVD	JACKSON	NJ 08527
	V1	07	01	05	5	F	-	-	-	07	07	-	-	SHIFRA	-	MIZRAHI
														3 LEHIGH BLVD	JACKSON	NJ 08527
	V1	09	01	05	3	F	-	-	-	05	05	-	-	ESTHER	-	MIZRAHI
														3 LEHIGH BLVD	JACKSON	NJ 08527
	V2	01	01	05	20	M	-	-	-	11	04	-	-	CHANOCH	Y	SUSSMAN
														93 FOREST DR	LAKEWOOD	NJ 08701
	V2	03	01	04	22	F	01	08	01	11	04	-	-	SARAH	L	GOLDRING
														34 ENGLEBERG TER	LAKEWOOD	NJ 08701

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V2 stated that a vehicle in front of him had stopped abruptly due to geese crossing the street which resulted in V1 striking V2 at the 5 o'clock.

Driver of V1 stated V2 had stopped in front of her and she attempted to swerve to avoid striking V2 but ultimately struck V2 at the 5 o'clock.

The result of the investigation revealed Driver of V1 was at fault due to not maintaining a proper distance while traveling behind V2. It should be noted that the passenger of V2 stated she had hit her head and had a complaint of pain but refused to be evaluated at this time. All other parties involved reported no injuries at this time.

146 Officer's Signature

RIHACEK, A

147 Badge #

421

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending ☒ Complete

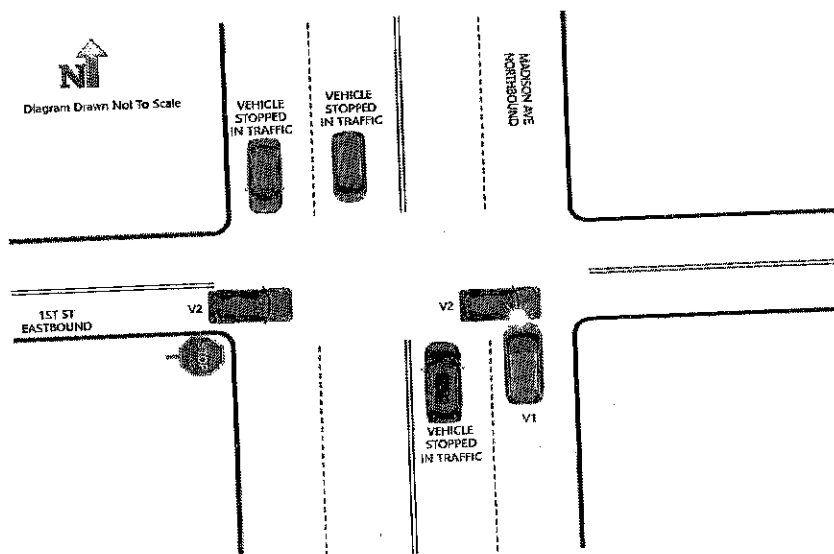
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-021541**

(Refer to vehicle by number)

Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 2 provided an international Driver's License from Poland as well as Passport upon request. License information provided in Report.

Driver 1 stated he was traveling Northbound on Madison Ave in the Right Lane towards 1st St. He stated while approaching 1st St Vehicle 2 traveled Eastbound through the intersection. Driver 1 stated he did not see Vehicle 2 and collided into Vehicle 2.

Driver 2 stated she was stopped at the Stop Sign facing Eastbound on 1st St. She stated Vehicles traveling on Madison Ave in both directions stopped to allow her to travel through the intersection. Driver 2 stated she waited briefly and felt it was safe to proceed through the intersection. She stated while traveling through the intersection Vehicle 1 was traveling Northbound on Madison Ave at a high rate of speed and collided into her Vehicle.

I determined Crash was caused by Vehicle 2 for Not Yielding to the Right Away Vehicle.

Vehicle 1 was towed by Heshey's Towing.
Vehicle 2 was towed by Barina's Towing.

146 Officer's Signature
MCAVOY D147 Badge #
372148 Reviewer
JPBadge #
283149 Case Status
☐ Pending ☒ Complete

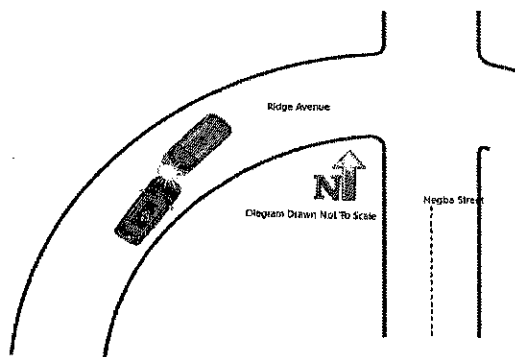
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-021565**

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death		
	83	84	85	86	87	88	89	90	91	92	93	94	95			
ALL INVOLVED	01	03	01	05	12	F	-	-	-	11	04	-	-	RIVKA - GESTETNER	-	-
	01	08	01	05	10	F	-	-	-	11	04	-	-	102 PERAL ST LAKEWOOD NJ 08701	-	-
	01	09	01	05	8	M	-	-	-	11	04	-	-	RAITZEL - GESTETNER	-	-
	01	09	01	05	8	M	-	-	-	11	04	-	-	102 PEARL ST LAKEWOOD NJ 08701	-	-
	01	09	01	05	6	M	-	-	-	11	04	-	-	YISROEL - GESTETNER	-	-
	01	09	01	05	6	M	-	-	-	11	04	-	-	102 PEARL ST LAKEWOOD NJ 08701	-	-
ALL INVOLVED	01	05	01	05	4	F	-	-	-	11	04	-	-	MEYER - GESTETNER	-	-
	01	05	01	05	4	F	-	-	-	11	04	-	-	102 PEARL ST LAKEWOOD NJ 08701	-	-
ALL INVOLVED	01	04	01	05	12D	F	-	-	-	06	06	-	-	YOCHEVED - GESTETNER	-	-
	01	04	01	05	12D	F	-	-	-	06	06	-	-	102 PEARL ST LAKEWOOD NJ 08701	-	-
ALL INVOLVED	01	04	01	05	12D	F	-	-	-	06	06	-	-	ESTHER - GESTETNER	-	-
	01	04	01	05	12D	F	-	-	-	06	06	-	-	102 PEARL ST LAKEWOOD NJ 08701	-	-

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated she turned left from Negba Street onto Ridge Avenue. She was going around the bend and wasn't sure where vehicle 2 came from and she crashed into vehicle 2. Vehicle 1 sustained damage to the front end. Driver 1 had a complaint of a possible injury, however I was unable to get more info from her or first aid. She refused medical treatment on scene and drove herself and passengers to a local doctors office.

Driver 2 stated he was driving east on Ridge Avenue towards Negba Street. He saw vehicle 1 coming around the bend closer to the center of the road and tried swerving to the right however still crashed into vehicle 1. Vehicle 1 sustained damage to the front end.

Based on the statements from both parties, the roadway being tight with no lane markings, and no available video recording or witness's, at this time fault is unable to be determined.

146 Officer's Signature

MANDELBAUM, J

147 Badge #

420

148 Reviewer

JP

Badge #

283

149 Case Status

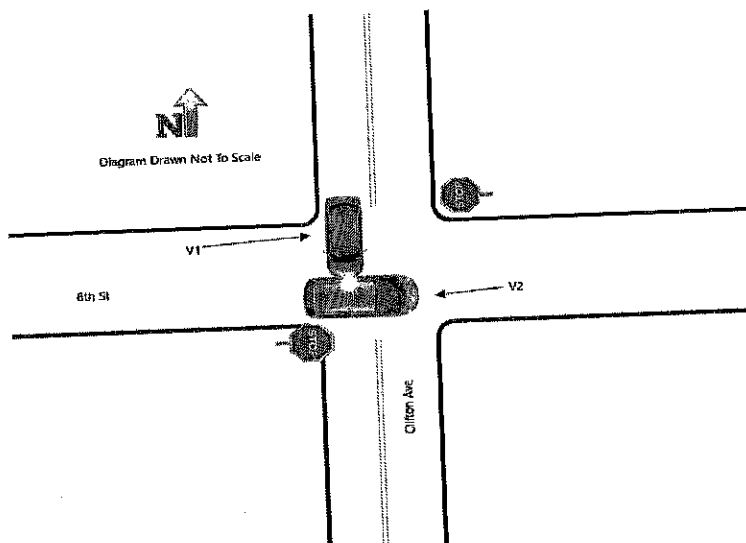
☐ Pending ☒ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-021567**

(Refer to vehicle by number)

Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death	
83	84	85	86	87	88	89	90	91	92	93	94	95		
02	06	01	05	12	F	-	-	-	11	11	02	-	CYNTHIA LOPEZ	-
													875 BROADWAY	W LONG BRANCH NJ 07764 -

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated, he was traveling south on Clifton Ave. He stated, suddenly vehicle 2 appeared in front of his vehicle causing a collision. The damage was primarily to the front end. No injuries reported.

Driver 2 stated, he was facing east at the intersection of 8th St & Clifton Ave observing the stop sign. He stated, the roadway appeared to be clear so he began to continue east. He stated, suddenly vehicle 1 was traveling at a high rate of speed and collided with the side of his vehicle. The damage was primarily to the driver side rear door. The driver suffered a possible left hand injury from the airbag deployment.

As a result of my investigation, I, Patrolman Connor Woods #418 determined driver 2 at fault for the crash due to failing to yield the right of way to driver 1.

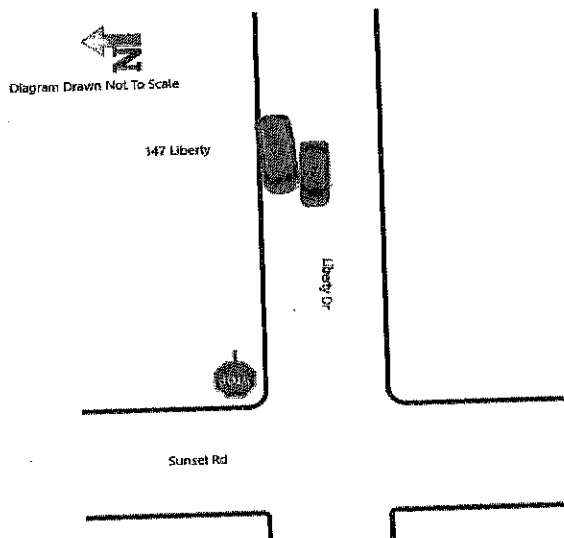
146 Officer's Signature
WOODS, C147 Badge #
418148 Reviewer
JPBadge #
283149 Case Status
☐ Pending ☒ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01
Station: - Case No: 22-021569

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 was parked facing westbound in front of 147 Liberty Dr. She reported that she put the vehicle into drive and started to leave from the parking spot to merge onto Liberty Dr. She did not see vehicle 2 already travelling westbound on Liberty Dr and crashed into the passenger side of his vehicle.

Driver of vehicle 2 travelling westbound on Liberty Dr headed towards Sunset Road. He reported that as he passed 147 Liberty Dr, vehicle 1 was parked and started to merge into his lane and crashed into the passenger side of his vehicle.

After my investigation, I determined that driver of vehicle 1 is at fault for failure to yield to the right of way traffic. Vehicle 1 sustained disabling damage to the front driver side of the bumper. Vehicle 2 sustained moderate damage to the passenger side front and rear door. Vehicle 1 was towed by Moishy's Towing. Vehicle 2 was able to drive from the scene. No reported injuries at the scene of the crash.

146 Officer's Signature

AMOROSO, A

147 Badge #

415

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending☒ Complete

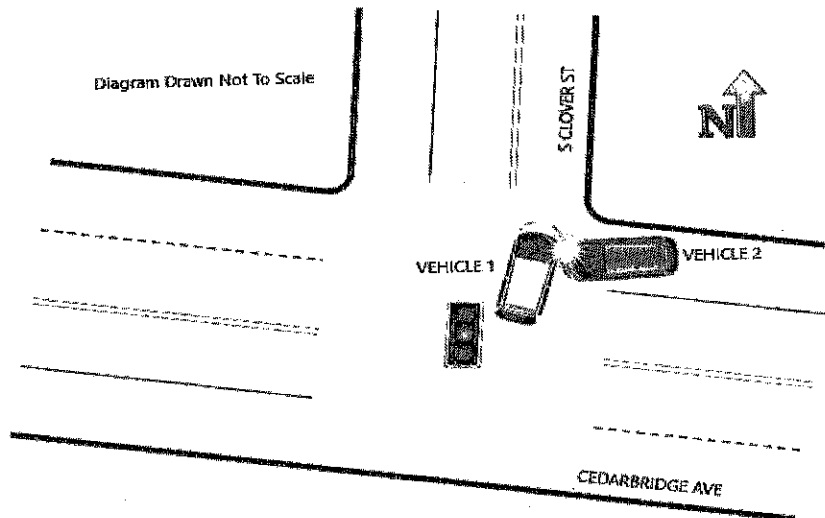
PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable		☐ Non-Reportable		☐ Change Report	
1 Case Number 22-021599		10 Crash Occurred On: CEDARBRIDGE AVE		11 Speed Limit 45		0528		04	
2 Police Dept of LAKEWOOD TOWNSHIP F01		3 Station/Precinct -		12 Route No. S CLOVER ST		13 Milepost 35		118a	
4 Date of Crash mm dd yy 03/20/22 SUNDAY		5 Day Of Week SUNDAY		6 Time (use 2400 hrs) 2136		7 Municipality Code 1514		118b	
8 Total Killed --		9 Total Injured --		21 Latitude 40.082700		22 Longitude -74.201450		119a	
23 Veh # 1		24 Policy No. -		25 NJ Ins. Code -		53 Veh # 2		54 Policy No. 6057604354	
26 Driver's First Name JOSE		27 Number & Street 194 E 4TH ST		28 City LAKEWOOD		29 Sex M		55 NJ Ins. Code 100	
30 Eyes 02		31 State NJ		32 Driver's License Number R91774100005650		33 DOB mm dd yyyy 05/25/1965		56 Driver's First Name SHAKIRA	
34 Expires mm yy -		35 Owner's First Name VICTOR		36 Number & Street 2500 KNIGHTS RD APT 160 06		37 City BENSALEM		57 Number & Street 112 WOODLAKE MANOR DR	
38 Make FORD		39 Model SW		40 Color WHI		41 Year 2002		58 City LAKEWOOD	
42 Plate No. KLB9604		43 State PA		44 VIN 2FMZA51472BB84028		45 Expires mm yy 05 20		59 Sex F	
46 Vehicle Removed To BARINA'S AUTOMOTIVE		47 Authority Owner		48 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0 % Pending		49 Hazardous Material None On Board Spill Hazard Class Placard No.		60 Eyes 02	
50 Carrier No. USDOT MC/MX		51 GVWR/GCWR Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs		52 Motor Carrier or Government Entity -		53 Veh # 2		61 State NJ	
54 Policy No. -		55 NJ Ins. Code -		56 Driver's License Number S67737037762872		57 Number & Street 112 WOODLAKE MANOR DR		62 Driver's License Number S67737037762872	
58 City LAKEWOOD		59 Sex M		60 Eyes 02		61 State NJ		62 Driver's License Number S67737037762872	
63 DOB mm dd yyyy 12/15/1987		64 Expires mm yy 12 25		65 Owner's First Name SHAKIRA		66 Number & Street 112 WOODLAKE MANOR DR		67 City LAKEWOOD	
68 Make GMC		69 Model ACA		70 Color GRY		71 Year 2009		72 Plate No. P20LFB	
73 State NJ		74 VIN 1GKEV13D99J108964		75 Expires mm yy 04 22		76 Vehicle Removed To BARINA'S AUTOMOTIVE		77 Authority Owner	
78 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0 % Pending		79 Hazardous Material None On Board Spill Hazard Class Placard No.		80 Carrier No. USDOT MC/MX		81 GVWR/GCWR Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs		82 Motor Carrier or Government Entity -	
83 Damage To Other Property Yes (If Yes, describe) No		84 Yes (If Yes, describe) No		85 Yes (If Yes, describe) No		86 Yes (If Yes, describe) No		87 Yes (If Yes, describe) No	
88 Yes (If Yes, describe) No		89 Yes (If Yes, describe) No		90 Yes (If Yes, describe) No		91 Yes (If Yes, describe) No		92 Yes (If Yes, describe) No	
93 Yes (If Yes, describe) No		94 Yes (If Yes, describe) No		95 Yes (If Yes, describe) No		96 Yes (If Yes, describe) No		97 Yes (If Yes, describe) No	
98 Yes (If Yes, describe) No		99 Yes (If Yes, describe) No		100 Yes (If Yes, describe) No		101 Yes (If Yes, describe) No		102 Yes (If Yes, describe) No	
103 Yes (If Yes, describe) No		104 Yes (If Yes, describe) No		105 Yes (If Yes, describe) No		106 Yes (If Yes, describe) No		107 Yes (If Yes, describe) No	
108 Yes (If Yes, describe) No		109 Yes (If Yes, describe) No		110 Yes (If Yes, describe) No		111 Yes (If Yes, describe) No		112 Yes (If Yes, describe) No	
113 Yes (If Yes, describe) No		114 Yes (If Yes, describe) No		115 Yes (If Yes, describe) No		116 Yes (If Yes, describe) No		117 Yes (If Yes, describe) No	
118 Yes (If Yes, describe) No		119 Yes (If Yes, describe) No		120 Yes (If Yes, describe) No		121 Yes (If Yes, describe) No		122 Yes (If Yes, describe) No	
123 Yes (If Yes, describe) No		124 Yes (If Yes, describe) No		125 Yes (If Yes, describe) No		126 Yes (If Yes, describe) No		127 Yes (If Yes, describe) No	
128 Yes (If Yes, describe) No		129 Yes (If Yes, describe) No		130 Yes (If Yes, describe) No		131 Yes (If Yes, describe) No		132 Yes (If Yes, describe) No	
133 Yes (If Yes, describe) No		134 Yes (If Yes, describe) No		135 Yes (If Yes, describe) No		136 Yes (If Yes, describe) No		137 Yes (If Yes, describe) No	
138 Yes (If Yes, describe) No		139 Yes (If Yes, describe) No		140 Yes (If Yes, describe) No		141 Yes (If Yes, describe) No		142 Yes (If Yes, describe) No	
143 Yes (If Yes, describe) No		144 Yes (If Yes, describe) No		145 Yes (If Yes, describe) No		146 Yes (If Yes, describe) No		147 Yes (If Yes, describe) No	
148 Yes (If Yes, describe) No		149 Yes (If Yes, describe) No		150 Yes (If Yes, describe) No		151 Yes (If Yes, describe) No		152 Yes (If Yes, describe) No	
153 Yes (If Yes, describe) No		154 Yes (If Yes, describe) No		155 Yes (If Yes, describe) No		156 Yes (If Yes, describe) No		157 Yes (If Yes, describe) No	
158 Yes (If Yes, describe) No		159 Yes (If Yes, describe) No		160 Yes (If Yes, describe) No		161 Yes (If Yes, describe) No		162 Yes (If Yes, describe) No	
163 Yes (If Yes, describe) No		164 Yes (If Yes, describe) No		165 Yes (If Yes, describe) No		166 Yes (If Yes, describe) No		167 Yes (If Yes, describe) No	
168 Yes (If Yes, describe) No		169 Yes (If Yes, describe) No		170 Yes (If Yes, describe) No		171 Yes (If Yes, describe) No		172 Yes (If Yes, describe) No	
173 Yes (If Yes, describe) No		174 Yes (If Yes, describe) No		175 Yes (If Yes, describe) No		176 Yes (If Yes, describe) No		177 Yes (If Yes, describe) No	
178 Yes (If Yes, describe) No		179 Yes (If Yes, describe) No		180 Yes (If Yes, describe) No		181 Yes (If Yes, describe) No		182 Yes (If Yes, describe) No	
183 Yes (If Yes, describe) No		184 Yes (If Yes, describe) No		185 Yes (If Yes, describe) No		186 Yes (If Yes, describe) No		187 Yes (If Yes, describe) No	

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-021599

(Refer to vehicle by number)

Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death	
83	84	85	86	87	88	89	90	91	92	93	94	95	ZIONNA - SOTO-ROACH	
2	04	01	05	15	F	-	-	-	11	04	-	-	112 WOODLAKE MANOR I LAKEWOOD NJ 08701	-

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of Vehicle 1 stated he was conducting a left turn onto S Clover St from Cedarbridge Ave with a yellow traffic signal. Driver of Vehicle 1 observed Vehicle 2 approaching the intersection from the east on Cedarbridge Ave, and believed the Vehicle 2 was going to stop at the traffic light, so driver of Vehicle 1 continued into the intersection. Vehicle 2 continued into the intersection, resulting in the collision of Vehicle 1 and Vehicle 2. Driver of Vehicle 2 stated she was travelling west on Cedarbridge Ave, entering the intersection of S Clover St with a green traffic signal when Vehicle 1 conducted a left turn onto S Clover St from Cedarbridge Ave and collided into Vehicle 2.

Vehicle 1 sustained damages consisting of excessive denting to the front passenger door and the front passenger wheel area. Vehicle 2 sustained damages consisting of excessive denting to the front passenger wheel area and front passenger bumper area.

From my investigation, I concluded driver of Vehicle 1 at fault for failing to yield to Vehicle 2.

Driver of Vehicle 1 was issued a motor vehicle citation for Failing to Yield (39:4-90), Operating with a Suspended License (39:3-40), Uninsured Motor Vehicle (39:6B-2), and Unregistered Vehicle (39:3-4).

Box 24 & 25 * - Vehicle 1 has no valid insurance.

146 Officer's Signature
SEEHAUSEN, K147 Badge #
416148 Reviewer
DIBIASEBadge #
286149 Case Status
☐ Pending ☒ Complete

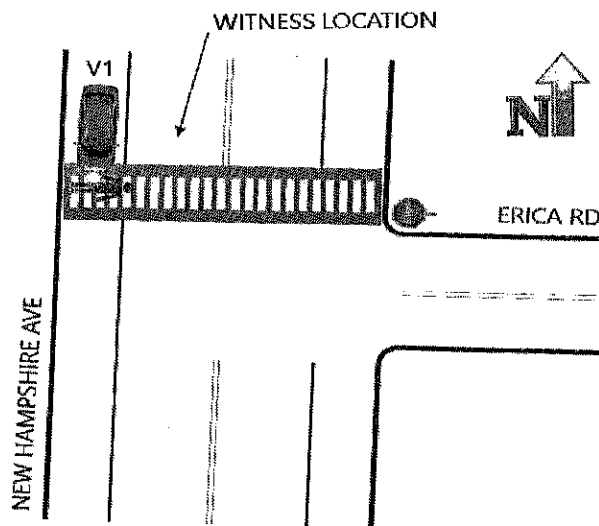
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD POLICE** Code: **01**
 Station: - Case No: **22-020509**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
I														
N														
V														
O														
L														
V														
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I														
D														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 struck a pedestrian on the shoulder of New Hampshire Avenue southbound, at the intersection with Erica Road. Prior to the crash V1 was being driven south on New Hampshire Avenue, while the pedestrian was standing on a marked crosswalk on the shoulder of New Hampshire Avenue (southbound side of the road).

I first spoke to independent witness Rodny Rodriguez, who stated that he stopped just prior to the crosswalk to allow the pedestrian to cross. Rodny said that approximately four vehicles stopped behind him (presumed to be waiting to turn left onto Erica Road) when a southbound vehicle (V1) decided to pass all of them on the shoulder and struck the pedestrian who was standing near Rodny's vehicle. Rodny said the pedestrian was sent into the air and flipped three times before hitting the ground.

The pedestrian was being loaded into an ambulance when I arrived. His information was obtained from an identification in his possession. EMS informed me that he sustained a serious injury to his left leg, and had head trauma. The pedestrian was conscious the entire time, but seemed to have no recollection of being struck by a vehicle.

Driver 1 stated there were several people turning left in front of him so he decided to pass them all on the shoulder. Driver 1 said that the pedestrian was wearing dark clothing and he did not see him until the last second. Driver 1 stated he braked hard but could not stop in time. It should be noted that there are no street lamps on the southbound side of New Hampshire Avenue near this crosswalk. The poor lighting contributed to the crash, but the primary cause is Driver 1 passing vehicles improperly on the shoulder in violation of 39:4-85. He was issued one summons for this.

146 Officer's Signature

BURKHARDT B

147 Badge #

361

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending☒ Complete

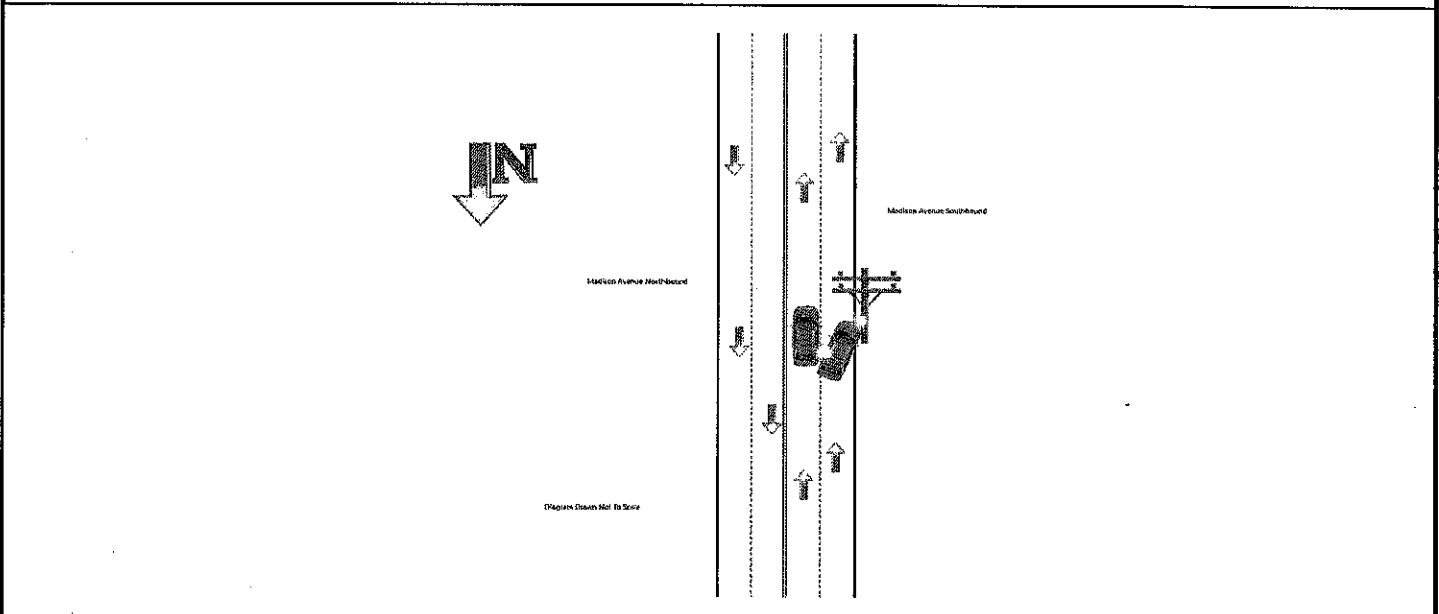
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-020565**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
A L L I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V1 stated he was traveling Southbound on Madison Avenue in the right lane when V2 merge onto his lane causing the accident. The Driver of V2 stated she was also driving Southbound on Madison Avenue in the left lane when V1 drove onto her lane. A witness stated that he saw V2 swerving onto the lane of V1. No injuries were reported. I can't make an adequate determination on who's at fault, due to unclear evidence, and conflicting statements given.

146 Officer's Signature

REYES S

147 Badge #

342

148 Reviewer

SGT. M. LORENC

Badge #

316

149 Case Status

☐ Pending ☒ Complete

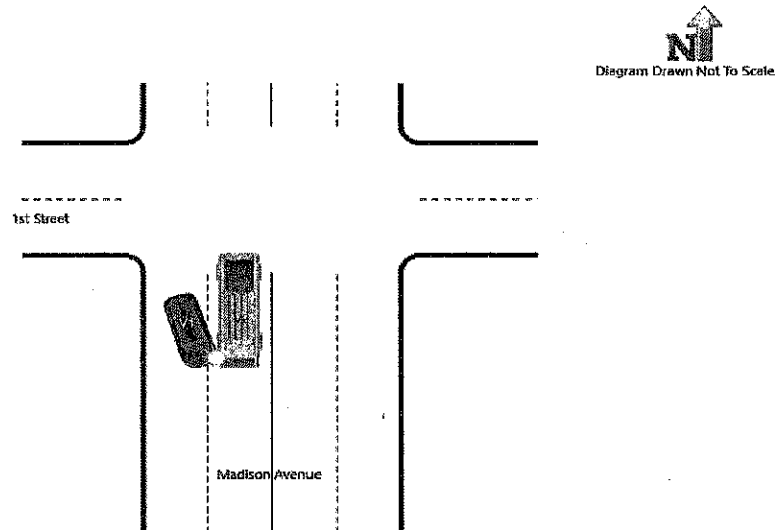
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-021768**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 was traveling Southbound on Madison Avenue. Driver 1 said she was trying to change lanes when V2 collided with her car.

Vehicle 2 was traveling Southbound on Madison Avenue. Driver 2 said he was in the left lane going along with traffic when V2 tried to cut in front of his car and collided with his vehicle.

Investigations revealed both vehicles were traveling Southbound on Madison Avenue. V1 was in the right lane, and V2 was in the left lane. V1 failed to yield the right of way to V2 as the vehicle traveled in the left lane. No injuries were reported at this time.

146 Officer's Signature

CUZCO-BENITES W

147 Badge #

407

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending☒ Complete

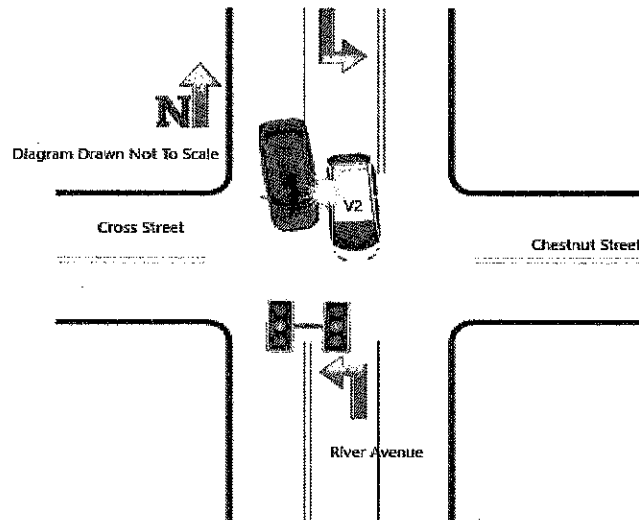
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-021808**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
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V														
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V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated he was on River Avenue facing southbound and was waiting to turn left onto Chestnut Street. He believes that vehicle 2 came up behind him and sideswiped him.

Driver 2 stated he was on River Avenue southbound waiting to turn left onto Chestnut Street. He was in the intersection when he felt vehicle 1 crash into the right side of his vehicle.

Upon my arrival I observed vehicle 1 stopped on River Avenue on the white line between the turning lane and the forward lane of travel. Vehicle 2 was to the left and slightly up ahead in the intersection. Vehicle 1 had damage to the driver side and the driver mirror was pushed inward consistent with a vehicle moving forward as it sideswiped another vehicle. Vehicle 2 had damage to the passenger side consistent with a mirror sideswiping it.

Based on my investigation vehicle 1 is at fault for this crash.

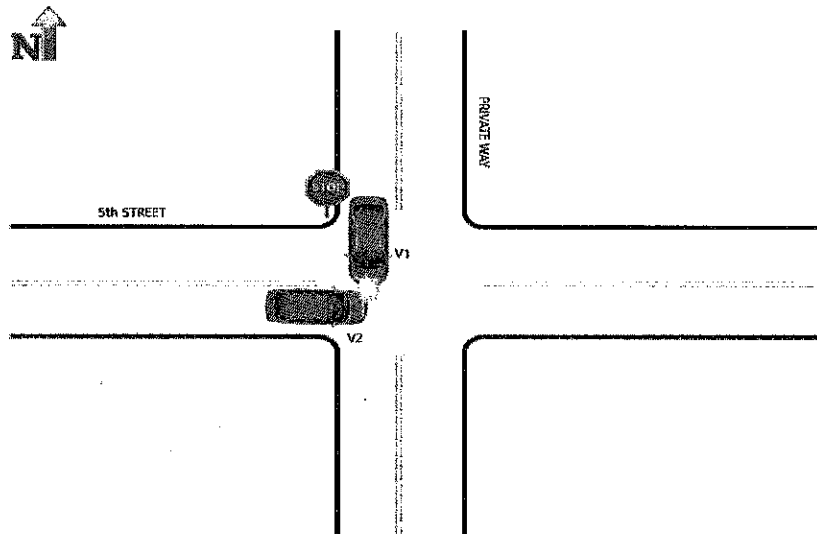
146 Officer's Signature
MANDELBAUM, J147 Badge #
420148 Reviewer
DIBIASEBadge #
286149 Case Status
☐ Pending ☒ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01
Station: _____ Case No: 22-021854

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
L														
E														
F														
I														
N														
V														
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H														
V														
E														
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 failed to stop at the intersection of 5th Street and Private Way, making contact with Vehicle 2.

Driver 1 stated she was traveling South on Private Way. Driver 1 stated she must have been distracted and does not believe she stopped at the stop sign at the intersection of 5th Street. Driver 1 stated she did not see Vehicle 2 and made contact with Vehicle 2.

Driver 2 stated she was traveling East on 5th Street entering the intersection of Private Way when Vehicle 1 made contact with her vehicle.

There were no reported injuries on scene. Vehicle 1 had disabling damage to the front fender and was towed by Yitzy's Towing. Vehicle 2 had disabling damage to the front fender and was also towed by Yitzy's Towing. Driver 1 was issued one summons for Failure to Stop/Yield (39:4-144) 1514-A-292634.

146 Officer's Signature
STEFANELLI E147 Badge #
364148 Reviewer
SGT. M. LORENCBadge #
316149 Case Status
☐ Pending ☒ Complete

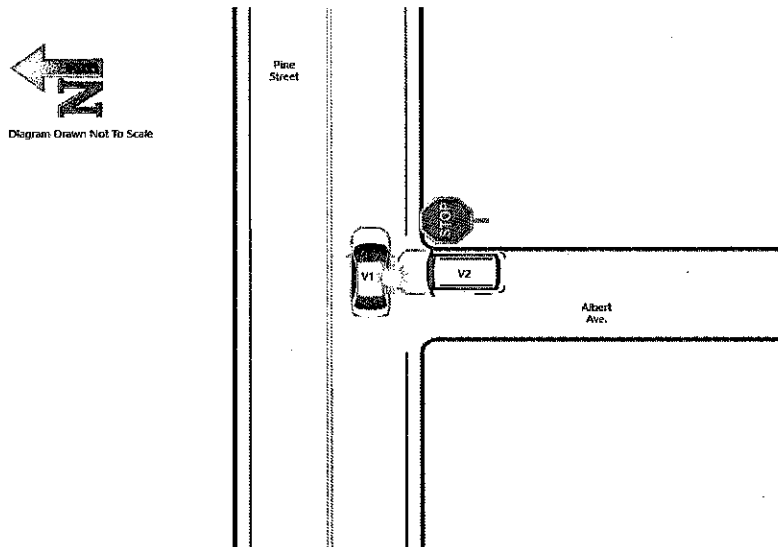
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-014993**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
F														
I														
N														
V														
O														
L														
V														
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D														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated that she was traveling east bound on Pine Street when vehicle 2 crashed into her. There were no injuries reported or observed to the occupant of vehicle 1. Vehicle 1 was left on scene for a private tow company at a later time.

With translation help Driver 2 stated that he was making a left turn on to Pine Street from Albert Ave., did not see vehicle 1, and caused the crash. There were no injuries reported to the occupant of vehicle 2. Vehicle 2 was driven from the scene by the driver.

Driver 2 is at fault of the crash for failure to yield to the right of way of vehicle 1.

146 Officer's Signature

MOONEY JR M

147 Badge #

330

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending ☒ Complete

96	PAGE <u>1</u> OF <u>2</u> ☐ Fatal										New Jersey Police Crash Investigation Report										☒ Reportable ☐ Non-Reportable ☐ Change Report										
05	1 Case Number										10 Crash Occurred On: RIVER AVE & PROSPECT ST										11 Speed Limit 45										118a
02	22-021705																														25
01	2 Police Dept of										Code										12 Route No. Suffix 13 Milepost										118b
98	LAKEWOOD TOWNSHIP										01										18 Speed Limit 40										-
01	3 Station/Preinct										500										19 To 17 Cross Road Name										119a
99																															04
02	4 Date of Crash										5 Day Of Week										6 Time (use 2400 hrs)										119b
100a	03/21/22										MONDAY										0740										-
01																					1514										120a
100b	23 Veh #										24 Policy No.										25 NJ Ins. Code										01
04	1										6025158262061										884										120b
101																															01
02	26 Driver's First Name										Initial Last Name										29 Sex										121a
102	PESSY										- FRIEDLANDER										F										01
01	27 Number & Street										57 Number & Street																				121b
103	196 HADASSAH LANE										390 WOODLAKE MANOR DR																				01
01	28 City										State Zip										58 City										
104	LAKEWOOD										NJ 08701										LAKEWOOD										
2																					NJ 08701										
	30 Eyes										DL Class										Restrictions										122
	06										D																				01
105	32 Driver's License Number										33 DOB										34 Expires										123
03	F74016250062006										12/05/2000										12 24										03
106	35 Owner's First Name										Initial Last Name										65 Owner's First Name										
-																															124
107	36 Number & Street										66 Number & Street																				11
-	196 HADASSAH LANE										390 WOODLAKE MANOR DR																				125
108	37 City										State Zip										67 City										11
01	LAKEWOOD										NJ 08701										LAKEWOOD										126a
109	38 Make										39 Model										40 Color										26
01	TOYT										SIE										BLU 2010										126b
110	44 VIN										45 Expires										74 VIN										
01	5TDKK4CC6AS323158										09 22										5YFS4RCXLP053078										126c
111	46 Vehicle Removed To										76 Vehicle Removed To																				126d
01	BARINA'S AUTOMOTIVE										BARINA'S AUTOMOTIVE																				126e
112	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded										☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded																				26
-	☐ Left At Scene ☐ Towed Impounded										☐ Left At Scene ☐ Towed Impounded																				127a
113	47 Authority										77 Authority																				127b
-	☐ Owner ☒ Driver ☐ Police										☐ Owner ☒ Driver ☐ Police																				127c
114	48 Alcohol/Drug Test										49 Hazardous Material										78 Alcohol/Drug Test										26
-	Given: ☒ No ☐ Yes ☐ Refused										☒ None ☐ On Board ☐ Spill										Given: ☒ No ☐ Yes ☐ Refused										127d
115	Type: ☐ Breath ☐ Blood ☐ Urine																				Type: ☐ Breath ☐ Blood ☐ Urine										-
-	Results: 0. - % ☐ Pending										Hazard Class Placard No.										Results: 0. - % ☐ Pending										127e
116	50 Carrier No.										51 GVWR/GCWR										80 Carrier No.										127d
03	☐ USDOT ☒ None										☐ Weight <= 10,000 lbs										☐ USDOT ☒ None										-
117	☐ MC/MX										☐ Weight 10,001-26,000 lbs										☐ MC/MX										26
02	☐ Weight >= 26,001 lbs										☐ Weight >= 26,001 lbs																				128
	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity																				129
	Number & Street										Number & Street																				130
	City										State Zip										City										12
																															131
	135 Damage To Other Property										☐ Yes (If Yes, describe) ☒ No																				11
	Oper. 136 Charge										137 Summons. No.										Oper. 138 Charge										132
	1																				1										1.1
	Oper. 140 Charge										141 Summons. No.										Oper. 142 Charge										133
	2										A-289228										2										04
	83										84										85										04
A	01										01										01										-
B	02										01										03										-
C																															-
D																															-

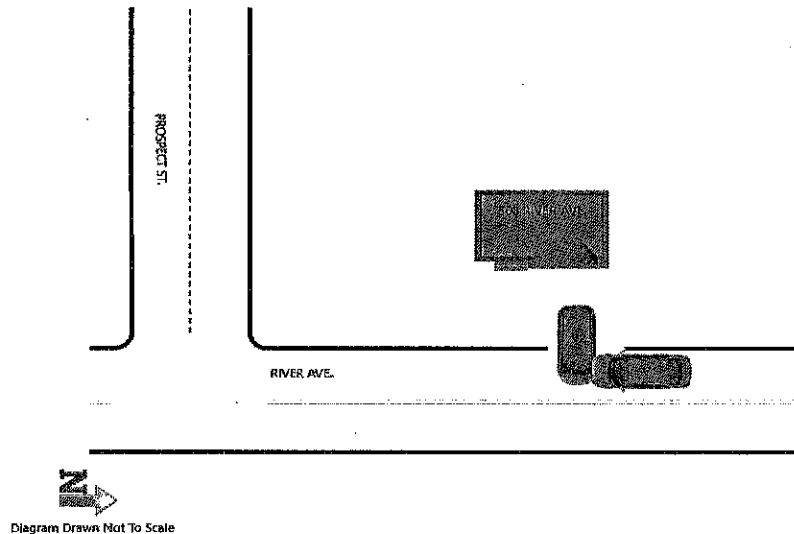
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: - Case No: **22-021705**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V1 stated that she was traveling south on River Ave. when V2 proceeded to pull out of a driveway casing the crash. Driver of V2 stated that he was facing east, preparing to pull out of the driveway of 508 River Ave. Driver of V2 further stated that as he went to make a left turn onto River Ave. he was struck by V1 to which he stated that V1 was traveling at a high rate of speed.

In conclusion to my investigation, I determined that the driver of V2 was at fault due to V1 having the right of way.

146 Officer's Signature

BROOKS D

147 Badge #

351

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending ☒ Complete

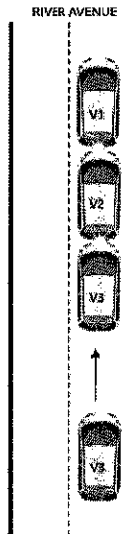
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
Station: _____ Case No: **22-021708**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	
	01	01	01	05	48	F	-	-	-	11	04	-	-	CHAVA S LOWINGER 1994 RIDGE HILL DRIVE TOMS RIVER NJ 08755
	02	01	01	05	29	M	-	-	-	11	04	-	-	MIGUEL A MORALES 911 GLOUCESTOR AVE BRICK NJ 08724
	03	01	01	05	42	M	-	-	-	11	04	-	-	RALPH D DEBLASIO JR 3 ROCHESTER DRI BRICK NJ 08723
	02	02	01	-	15	M	-	-	-	11	04	-	-	SHIMON - LOWINGER 1994 RIDGE HILL RD TOMS RIVER NJ 08755
	02	03	01	05	11	M	-	-	-	04	04	-	-	MOSHE - LOWINGER 1994 RIDGE HILL DRIVE TOMS RIVER NJ 08755

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver #1 stated she was stopped in traffic facing North on River Avenue (Route 9) when she was rear-ended by Vehicle #2. Vehicle #1 sustained moderate damage and was able to be driven from the scene.

Driver #2 stated he was stopped in traffic facing North on River Avenue (Route 9) when he was rear-ended by Vehicle #3. Driver #2 stated the collision caused the front of his vehicle to collide with the rear of vehicle #1. Vehicle #2 sustained moderate damage and was able to be driven from the scene.

Driver #3 stated he was traveling North on River Avenue (Route 9) and failed to stop in time for vehicles that were stopped in front of him. The center front of vehicle #3 collided with the center rear of vehicle #2. The collision caused vehicle #2 to be pushed forward and collide with vehicle #1.

Based on statements made by all drivers, damage to the vehicles and my observations on the scene, I determined that Driver #3 is at fault to due driver inattention and failing to stop in time to avoid the collision.

No injuries were reported at the scene. Driver #2 was issued motor vehicle summons #A291579 for 39:3-10 (unlicensed driver)

146 Officer's Signature

CAVALLO M

147 Badge #

337

148 Reviewer

EM

Badge #

288

149 Case Status

☐ Pending ☒ Complete

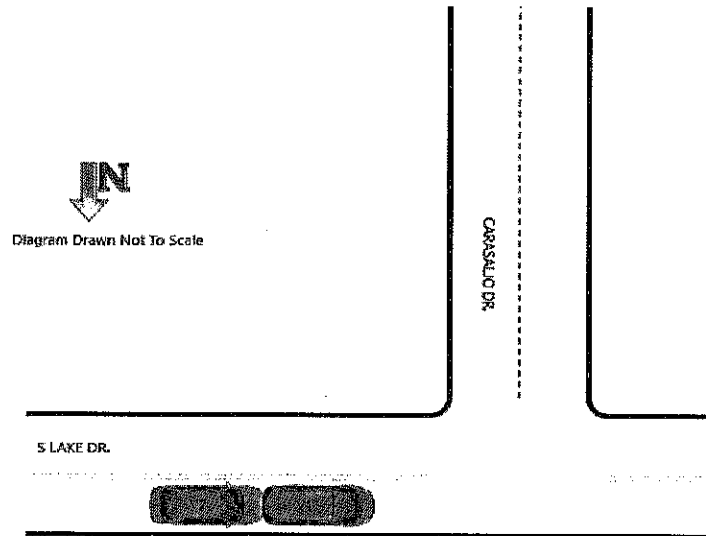
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-021731**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of V1 stated that she was traveling west on S Lake Dr. Driver of V1 further stated that as she was driving, a vehicle in front of her proceeded to come to an abrupt stop. Driver of V1 then stated that she applied her brakes and came to a complete stop, only to be struck in the rear by V2.

Driver of V2 stated that she was traveling west on S Lake Dr. directly behind V1. Driver of V2 stated that a vehicle in front of V1 proceeded to come to an abrupt stop. Driver of V2 stated that as she went to apply the brakes, she got too close and ultimately ended up striking V1 in the rear.

In conclusion to my investigation and the statements provided, I determined that the driver of V2 was still at fault for following too closely.

146 Officer's Signature

BROOKS D

147 Badge #

351

148 Reviewer

EM

Badge #

288

149 Case Status

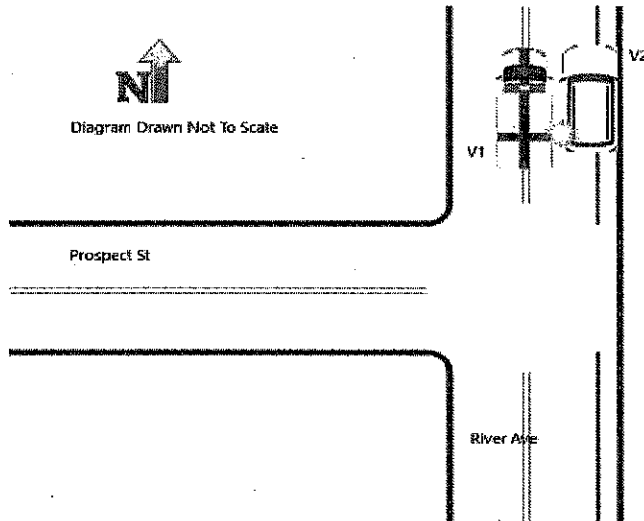
☐ Pending ☒ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-019904

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 was traveling Northbound on River Ave and crashed into vehicle 2 which was stopped due to vehicle 1 using his emergency lights.

Driver 1 stated he was traveling Northbound on River Ave with his emergency lights on. The cars in the Northbound lane moved over to the shoulder and as he was traveling he heard a bang. This bang was his vehicle crashing into the left side of vehicle 2.

Driver 2 stated he was traveling Northbound on River Ave when we pulled over due to vehicle 1 using its emergency lights. He stated he was stopped on the shoulder when vehicle 1 crashed into his vehicle.

There were no reported injuries on scene and both vehicles sustained minor damage.

Based on my observations and speaking with both parties, I determined that driver 1 was at fault for failing to avoid hitting vehicle 2.

146 Officer's Signature
GARRETSON C147 Badge #
391148 Reviewer
PABadge #
325149 Case Status
☐ Pending ☒ Complete

96	PAGE 1 OF 2		☐ Fatal		New Jersey Police Crash Investigation Report										☐ Reportable		☐ Non-Reportable		☒ Change Report																							
97	1 Case Number				22-019904										11 Speed Limit				118a		06																					
98	2 Police Dept of				Code		LAKEWOOD TOWNSHIP 01										10 Crash Occurred On:		12 Route No.		Suffix		13 Milepost		118b																	
99	3 Station/Precinct						-										☐ At Intersection With		Road Name		Dir		17 Cross Road Name		☐ NB ☐ EB		119a															
100a	4 Date of Crash				5 Day of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		19 Ramp		20 Route/Name		21 Latitude		22 Longitude		119b																			
100b	03/14/22				MONDAY		1346		1514		---		---										120a																			
101	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code				120b																	
102	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run												☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run												121a																	
103	26 Driver's First Name				Initial		Last Name		29 Sex		56 Driver's First Name				Initial		Last Name		59 Sex				121b																			
104	DANIEL				J		BOZZA		-		ROBERT				E		SMITH		-				122																			
105	27 Number & Street												57 Number & Street												123																	
106	28 City				State		Zip		58 City				State		Zip										124																	
107	30 Eyes				DL Class		Restrictions		Endorsements		31 State		60 Eyes				DL Class		Restrictions		Endorsements		61 State		125																	
108	32 Driver's License Number				33 DOB				mm dd yyyy		34 Expires		mm yy		62 Driver's License Number				63 DOB				mm dd yyyy		64 Expires		mm yy		126a													
109	35 Owner's First Name				Initial		Last Name		65 Owner's First Name				Initial		Last Name		36 Number & Street												126b													
110	☐ Same As Driver								☐ Same As Driver								37 City				State		Zip						126c													
111	38 Make				39 Model		40 Color		41 Year		42 Plate No.		43 State		66 Number & Street																126d											
112	44 VIN								45 Expires		74 VIN								75 Expires														126e									
113	46 Vehicle Removed To								76 Vehicle Removed To								47 Authority				☐ Owner ☐ Driver ☐ Police										127a											
114	48 Alcohol/Drug Test				Given: ☐ No ☐ Yes ☐ Refused		Type: ☐ Breath ☐ Blood ☐ Urine		Results: 0. % ☐ Pending		49 Hazardous Material				☐ None ☐ On Board ☐ Spill		Hazard Class		Placard No.		78 Alcohol/Drug Test				Given: ☐ No ☐ Yes ☐ Refused		Type: ☐ Breath ☐ Blood ☐ Urine		Results: 0. % ☐ Pending		79 Hazardous Material				☐ None ☐ On Board ☐ Spill		Hazard Class		Placard No.		127b	
115	50 Carrier No.				☐ USDOT ☐ MC/MX		☐ None		51 GVWR/GCWR				☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		80 Carrier No.				☐ USDOT ☐ MC/MX		☐ None		81 GVWR/GCWR				☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										127c					
116	52 Motor Carrier or Government Entity								82 Motor Carrier or Government Entity								Number & Street																				127d					
117	City				State		Zip		City				State		Zip		135 Damage To Other Property				☐ Yes (If Yes, describe) ☐ No														127e							
118	136 Charge								137 Summons. No.								138 Charge								139 Summons. No.												128					
119	140 Charge								141 Summons. No.								142 Charge								143 Summons. No.												129					
120	83				84		85		86		87		88		89		90		91		92		93		94		95		Names & Addresses of Occupants - If Deceased, Date & Time of Death				130									
121	A																																131									
122	B																																132									
123	C																																133									
124	D																																134									

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01
 Station: - Case No: 22-019904

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
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V														
O														
L														
H														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

On 3/22/2022 I spoke with driver 1 who stated he did not crash into vehicle 2, vehicle 2 crashed into his vehicle. Driver 1 said he had already passed vehicle 2 when vehicle 2 attempted to pass him on the right and crashed into the back right of his vehicle.

The damage to both vehicles indicates a side swipe.

Based on conflicting statements, I cannot determine who is at fault.

Submitted by Patrolman Christopher Garretson #391 3/22/2022

146 Officer's Signature

GARRETSON C

147 Badge #

391

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

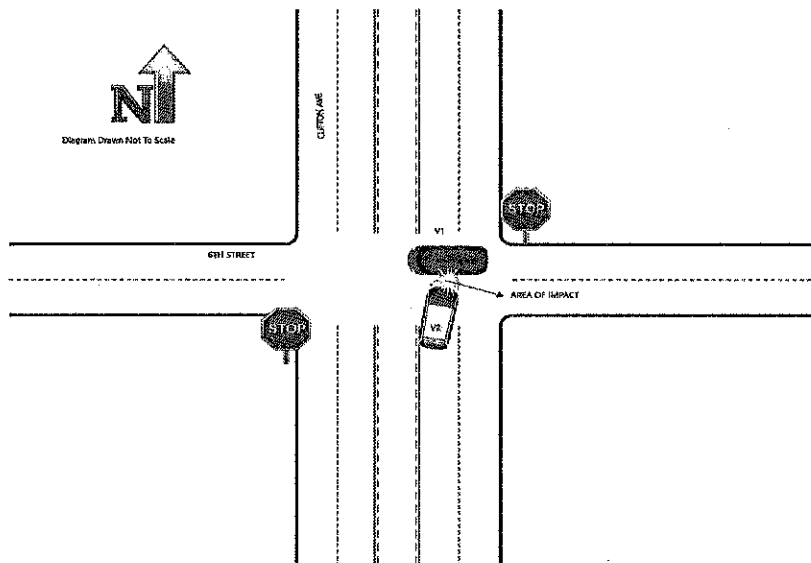
96	PAGE 1 OF 2										New Jersey Police Crash Investigation Report										☒ Reportable ☐ Non-Reportable ☐ Change Report										
05	1 Case Number										10 Crash Occurred On: CLIFTON AVE										11 Speed Limit										118a
97	22-015012																				35										04
01	2 Police Dept of										Code										12 Route No. Suffix 13 Milepost										118b
98	LAKEWOOD TOWNSHIP										01										18 Speed Limit										-
01	3 Station/Precinct																														119a
99																															25
07	4 Date of Crash										5 Day Of Week										6 Time (use 2400 hrs)										119b
100a	02/26/2022																				1130										-
01																					1514										-
100b																					1										120a
04	23 Veh #										24 Policy No.										25 NJ Ins. Code										01
101	1										6078003313										101										120b
02	26 Driver's First Name										Initial Last Name										29 Sex										121a
102	YISROEL										M NUSSBAUM										M										01
02	27 Number & Street																				56 Driver's First Name										121b
103	144 SOMERSET AVE																				HARRY										-
01	28 City										State Zip										57 Number & Street										-
104	LAKEWOOD										NJ 08701										1405 ARBORETUM PKWY										-
2	30 Eyes										DL Class										Restrictions										122
	2										D										-										01
105	32 Driver's License Number										33 DOB										34 Expires										123
03	N94557907401042										01/08/2004										01 25										01
106	35 Owner's First Name										Initial Last Name										65 Owner's First Name										124
-	Same As Driver										ELIMELECH - NUSSBAUM										Same As Driver										08
107	36 Number & Street																				66 Number & Street										125
-	144 SOMERSET AVE																				1405 ARBORETUM PKWY										04
108	37 City										State Zip										67 City										126a
01	LAKEWOOD										NJ 08701										LAKEWOOD										26
109	38 Make										39 Model										40 Color										126b
01	HOND										CRV										GRY 2019										-
110	44 VIN										45 Expires										74 VIN										126c
01	2HKRW6H34KH226488										10 22										5J8YD4H51LL028831										-
111	46 Vehicle Removed To																				76 Vehicle Removed To										126d
01	MOISHYS																				HESHYS TOWING										-
112	☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded																				☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded										126e
-	☐ Left At Scene ☐ Towed Impounded																				☐ Left At Scene ☐ Towed Impounded										26
113	47 Authority																				77 Authority										127a
-	☐ Owner ☒ Driver ☐ Police																				☒ Owner ☐ Driver ☐ Police										26
114	48 Alcohol/Drug Test										49 Hazardous Material										78 Alcohol/Drug Test										127b
-	Given: ☒ No ☐ Yes ☐ Refused										☒ None ☐ On Board ☐ Spill										Given: ☒ No ☐ Yes ☐ Refused										-
115	Type: ☐ Breath ☐ Blood ☐ Urine																				Type: ☐ Breath ☐ Blood ☐ Urine										127c
-	Results: 0, - % ☐ Pending										Hazard Class Placard No.										Results: 0, - % ☐ Pending										-
116	50 Carrier No.										51 GVWR/GCWR										80 Carrier No.										127d
04	☐ USDOT ☒ None										☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										☐ USDOT ☒ None										-
117	☐ MC/MX																				☐ MC/MX										127e
01																															26
	52 Motor Carrier or Government Entity																				82 Motor Carrier or Government Entity										128
	-																				-										26
	Number & Street																				Number & Street										129
	-																				-										09
	City										State Zip										City										130
	-										-										-										09
	135 Damage To Other Property										☐ Yes (If Yes, describe) ☒ No																				131
																															11
	Oper. 136 Charge										137 Summons. No.										Oper. 138 Charge										132
	01 39:4-144										289910																				11
	Oper. 140 Charge										141 Summons. No.										Oper. 142 Charge										133
																															04
																															134
																															04
A	01 01 01 05 18 M - - - 11 04 04 -										YISROEL M NUSSBAUM																				
B	02 01 01 03 69 M 04 08 01 11 04 04 -										HARRY - SUSSMAN																				
C											144 SOMERSET AVE LAKEWOOD NJ 08701																				
D											1405 ARBORETUM PKWY LAKEWOOD NJ 08701																				

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-015012

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

WHEN I ARRIVED BOTH VEHICLES WERE IN THE ROADWAY WITH DISABLING DAMAGE. BOTH VEHICLES HAD AIRBAGS DEPLOYED. DRIVER OF VEHICLE 1 HAD NO INJURIES WHILE DRIVER OF VEHICLE 2 COMPLAINED OF NECK PAIN, WITH A POSSIBLE INJURY.

DRIVER OF VEHICLE 1 STATED HE WAS GOING WEST ON 7TH STREET AND STOPPED AT THE STOP SIGN. HE STATED HE THOUGHT HE WOULD BE ABLE TO CROSS OVER THE INTERSECTION OF 7TH STREET AND CLIFTON AVE. BEFORE VEHICLE 2 PASSES HIM GOING NORTH ON CLIFTON AVE. AS HE PASSED OVER THE INTERSECTION BOTH VEHICLES COLLIDED.

DRIVER OF VEHICLE 2 STATED HE WAS GOING NORTH ON CLIFTON AVE WHEN HE SAW DRIVER OF VEHICLE 1 FAIL TO STOP AT THE STOP SIGN, WHICH LEAD TO HIS VEHICLE BEING STRUCK BY VEHICLE 1.

DRIVER OF VEHICLE 1 WAS ISSUED A SUMMONS IN THE MAIL FOR FAILING TO YIELD AND STOP FOR A MOVING VEHICLE. VEHICLE 1 WAS TOWED BY MOISHY'S AND VEHICLE 2 WAS TOWED BY HESHY'S.

BASED ON MY INVESTIGATION, DRIVER OF VEHICLE 1 WAS FULLY 100% AT FAULT FOR FAILING TO YIELD/STOP TO VEHICLE 2 AND FAILING TO STOP AT STOP SIGN. DRIVER OF VEHICLE 2 HAD THE RIGHT OF WAY DUE TO HIM NOT HAVING A STOP SIGN. DRIVER OF VEHICLE 1 HAD A STOP SIGN AND FAILED TO YIELD/STOP FOR VEHICLE 2.

146 Officer's Signature
GIBSON M147 Badge #
409148 Reviewer
PABadge #
325149 Case Status
☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

☐ Reportable ☐ Non-Reportable ☒ Change Report

1 Case Number 22-015012		10 Crash Occurred On: CLIFTON AVE		11 Speed Limit		118a	
2 Police Dept of LAKEWOOD TOWNSHIP		Code 01		12 Route No. 7TH STREET		118b	
3 Station/Preinct		☐ At Intersection With ☐ Feet ☐ Miles		13 Milepost ☐ N ☐ E of ☐ S ☐ W		119a	
4 Date of Crash mm dd yy 02/25/22		5 Day Of Week FRIDAY		6 Time (use 2400 hrs) 1130		119b	
7 Municipality Code 1514		8 Total Killed --		9 Total Injured --		120a	
23 Veh #		24 Policy No.		25 NJ Ins. Code		120b	
26 Driver's First Name YISROEL		Initial M		Last Name NUSSBAUM		121a	
27 Number & Street		28 City		29 Sex -		121b	
30 Eyes		DL Class		Restrictions		122	
31 State		Endorsements		32 Driver's License Number		123	
33 DOB mm dd yyyy		34 Expires mm yy		35 Owner's First Name ☐ Same As Driver		124	
36 Number & Street		37 City		38 Make		125	
39 Model		40 Color		41 Year		126a	
42 Plate No.		43 State		44 VIN		126b	
45 Expires		46 Vehicle Removed To		47 Authority ☐ Owner ☐ Driver ☐ Police		126c	
48 Alcohol/Drug Test Given: ☐ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. % ☐ Pending		49 Hazardous Material ☐ None ☐ On Board ☐ Spill Hazard Class Placard No.		50 Carrier No. ☐ USDOT ☐ None ☐ MC/MX		126d	
51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		52 Motor Carrier or Government Entity		53 Veh #		126e	
54 Policy No.		55 NJ Ins. Code		56 Driver's First Name HARRY		127a	
57 Number & Street		58 City		59 Sex -		127b	
60 Eyes		DL Class		Restrictions		127c	
61 State		Endorsements		62 Driver's License Number		127d	
63 DOB mm dd yyyy		64 Expires mm yy		65 Owner's First Name ☐ Same As Driver		127e	
66 Number & Street		67 City		68 Make		128	
69 Model		70 Color		71 Year		129	
72 Plate No.		73 State		74 VIN		130	
75 Expires		76 Vehicle Removed To		77 Authority ☐ Owner ☐ Driver ☐ Police		131	
78 Alcohol/Drug Test Given: ☐ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. % ☐ Pending		79 Hazardous Material ☐ None ☐ On Board ☐ Spill Hazard Class Placard No.		80 Carrier No. ☐ USDOT ☐ None ☐ MC/MX		132	
81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		82 Motor Carrier or Government Entity		83		133	
83		84		85		134	
86		87		88			
89		90		91			
92		93		94			
95		96		97			
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215		216		217		</	

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-015012**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
A L L I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

WHEN I ARRIVED BOTH VEHICLES WERE IN THE ROADWAY WITH DISABLING DAMAGE. BOTH VEHICLES HAD AIRBAGS DEPLOYED. DRIVER OF VEHICLE 1 HAD NO INJURIES WHILE DRIVER OF VEHICLE 2 COMPLAINED OF NECK PAIN, WITH A POSSIBLE INJURY.

DRIVER OF VEHICLE 1 STATED HE WAS GOING WEST ON 7TH STREET AND STOPPED AT THE STOP SIGN. HE STATED HE THOUGHT HE WOULD BE ABLE TO CROSS OVER THE INTERSECTION OF 7TH STREET AND CLIFTON AVE. BEFORE VEHICLE 2 PASSES HIM GOING NORTH ON CLIFTON AVE. AS HE PASSED OVER THE INTERSECTION BOTH VEHICLES COLLIDED.

DRIVER OF VEHICLE 2 STATED HE WAS GOING NORTH ON CLIFTON AVE WHEN HE SAW DRIVER OF VEHICLE 1 FAIL TO STOP AT THE STOP SIGN, WHICH LEAD TO HIS VEHICLE BEING STRUCK BY VEHICLE 1.

DRIVER OF VEHICLE 1 WAS ISSUED A SUMMONS IN THE MAIL FOR FAILING TO YIELD AND STOP FOR A MOVING VEHICLE. VEHICLE 1 WAS TOWED BY MOISHY'S AND VEHICLE 2 WAS TOWED BY HESHY'S.

BASED ON MY INVESTIGATION, DRIVER OF VEHICLE 1 WAS FULLY 100% AT FAULT FOR FAILING TO YIELD/STOP TO VEHICLE 2 AND FAILING TO STOP AT STOP SIGN. DRIVER OF VEHICLE 2 HAD THE RIGHT OF WAY DUE TO HIM NOT HAVING A STOP SIGN. DRIVER OF VEHICLE 1 HAD A STOP SIGN AND FAILED TO YIELD/STOP FOR VEHICLE 2.

146 Officer's Signature

PTL. M. GIBSON

147 Badge #

409

148 Reviewer

DIBIASE

Badge #

286

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 3 ☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable ☐ Non-Reportable ☐ Change Report																																																																					
01	1 Case Number		22-019093										118a																																																																					
97	2 Police Dept of		LAKEWOOD TOWNSHIP F01										118b																																																																					
01	3 Station/Precinct		100										119a																																																																					
98	4 Date of Crash		5 Day of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		119b																																																																					
01	03/11/22		FRIDAY		1421		1514		--		--		25																																																																					
02	10 Crash Occurred On:		STATE HWY 70										118c																																																																					
99	11 Speed Limit		W 50										118d																																																																					
01	12 Route No.		0070										118e																																																																					
01	13 Milepost		50										118f																																																																					
01	14 At Intersection With		NEW HAMPSHIRE AVE										119c																																																																					
02	15 Feet		N E of										119d																																																																					
100a	16 Siles		S W										119e																																																																					
01	17 Cross Road Name		19 Ramp To From:										119f																																																																					
02	20 Route/Name		21 Latitude										119g																																																																					
100b	22 Longitude		40.050920 -74.196590										120a																																																																					
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01	1		22028300457		996		2		AOJ2317485474023		370		120b																																																																					
02	26 Driver's First Name		Initial		Last Name		29 Sex		56 Driver's First Name		Initial		Last Name		121a																																																																			
01	KATELYNN		M		LUDLAM		F		ELIZABETH		A		AHREND		01																																																																			
01	27 Number & Street		1733 COMMONWEALTH BLVD										58 WESTGATE PLACE		121b																																																																			
01	28 City		TOMS RIVER										MANCHESTER		121c																																																																			
04	29 State		NJ										NJ		121d																																																																			
01	30 Eyes		DL Class		Restrictions		Endorsements		31 State		60 Eyes		DL Class		Restrictions		Endorsements		61 State																																																															
02	02		D		-		-		NJ		04		D		-		-		NJ																																																															
01	32 Driver's License Number		L90884267459892										62 Driver's License Number		A36372126151594										122																																																									
01	33 DOB		mm		dd		yyyy		34 Expires		mm		yy		63 DOB		mm		dd		yyyy		64 Expires		mm		yy		123																																																					
01	09/20/1989		09		20		1989		09		22		01/02/1959		01		02		1959		01		25		07		07																																																							
01	35 Owner's First Name		Initial		Last Name		65 Owner's First Name		Initial		Last Name		124																																																																					
01	MATTHEW		J		HILLS		ELIZABETH		A		AHREND		124																																																																					
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01	44 VIN		1D7HU16N22J252397										45 Expires		01		23		74 VIN		KMHDU4AD1AU208845										46 Expires		12		22		126b																																													
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01	49 Alcohol/Drug Test		Given: No Yes Refused										50 Hazardous Material		Given: No Yes Refused										51 Hazardous Material		Given: No Yes Refused										126e																																													
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04	52 Carrier No.		USDOT MC/MX										53 GVWR/GCWR		Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs										80 Carrier No.		USDOT MC/MX										81 GVWR/GCWR		Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs										127a																																	
04	54 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity										127b																																																																					
01	55 Number & Street		83 Number & Street										127c																																																																					
01	56 City		84 City										127d																																																																					
01	57 State		85 State										127e																																																																					
01	58 Zip		86 Zip										127f																																																																					
01	59 Damage To Other Property		Yes (If Yes, describe) No										128																																																																					
01	136 Charge		137 Summons. No.										138 Charge		139 Summons. No.										129																																																									
01	140 Charge		141 Summons. No.										142 Charge		143 Summons. No.										130																																																									
01	83		84										85		86										87		88										89		90										91		92										93		94										95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		131					
A	1		01										01		32										F		11										04		KATELYNN										M		LUDLAM										1733 COMMONWEALTH		TOMS RIVER		NJ		08757		132													
B	2		01										01		63										F		11										04		ELIZABETH										A		AHREND										58 WESTGATE PLACE		MANCHESTER		NJ		08759		133													
C	3		01										01		53										M		11										04		GREGG										C		SCHWEIKERT JR										2568 HOOPER AVE		BRICK		NJ		08723		134													
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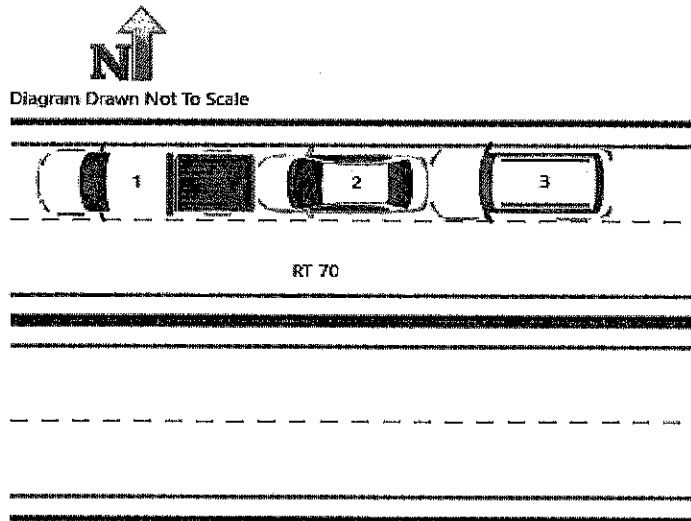
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-019093**

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle #1 was traveling West on Rt 70 in the right hand lane East of New Hampshire Ave. Vehicle #2 was traveling West on Rt 70 behind vehicle #1. Vehicle #3 was traveling West on Rt 70 behind vehicle #2. Vehicle #3 struck vehicle #2 in the rear causing vehicle #2 to strike vehicle #1 in the rear. Driver #1 stated that traffic was stop and go, she was slowing to stop and her vehicle was struck from the rear. Driver #2 stated that she was stopping in traffic and her vehicle was struck from the rear causing her vehicle to strike vehicle #1. Driver #3 stated that vehicle #2 stopped short and he could not stop in time to avoid the crash. Driver #3 was following too closely causing the crash.

146 Officer's Signature
PRZEWOZNIK J

147 Badge #
308

148 Reviewer
MY

Badge #
329

149 Case Status
☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-019717**

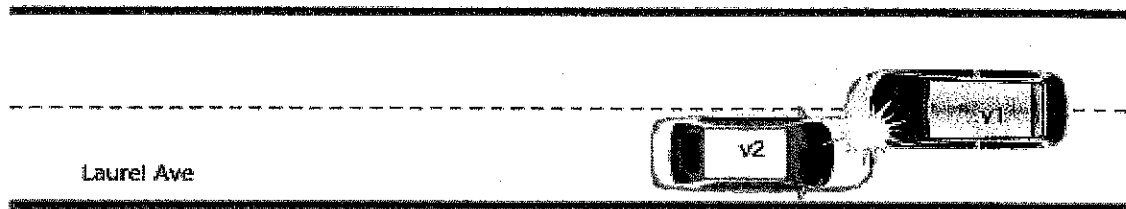
(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL E F I N V O L V E I D J	83	84	85	86	87	88	89	90	91	92	93	94	95	
	02	05	01	05	10	M	-	-	-	11	04	-	-	NOEL 941 CYPRESS AVE BRICK NJ 08724

144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not To Scale



145 Crash Description/Narrative

Driver of vehicle one does not recall the incident nor does he realize his vehicle has moderate front end damage.

Driver of vehicle two stated that she was driving east on Laurel Ave when she noticed a vehicle with no headlights on traveling toward her. As a result veh1 tried to swerve at the last second causing a side swipe crash. After the crash he fled and headed west on Laurel Ave.

Both vehicles sustained moderate to disabling damage.

No medical attention was needed.

I later found veh1 on Pearl St. Vehicle one was towed for John's Law.

146 Officer's Signature
SMITH D

147 Badge #
411

148 Reviewer
DIBIASE

Badge #
286

149 Case Status
☐ Pending ☒ Complete

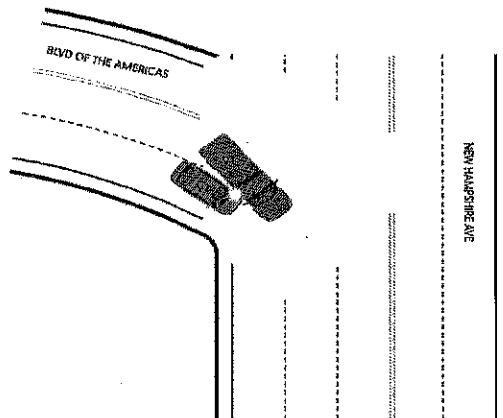
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-021783**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Both vehicle's 1 and 2 completed a right handed turn onto New Hampshire Avenue from Boulevard of the Americas. Once they completed their turns vehicle's 1 and 2 collided. It should be noted that you can only make a right handed turn onto New Hampshire Avenue from the Boulevard of the Americas.

Driver 1 stated he made his right handed turn and began to merge into the far right lane on New Hampshire Avenue to avoid on coming traffic. He continued to state he did not see vehicle 2 until it was to late.

Driver 2 stated she conducted her right handed turn and noticed vehicle 1 coming into her lane of travel. She beeped her horn to let driver 1 know she was there but he ended up crashing into right as she was doing so.

Vehicle 1's Insurance information: Samuel J. Paparone Ins., company code: 30104

146 Officer's Signature

WEAVER G

147 Badge #

397

148 Reviewer

DIBIASE

Badge #

286

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																			
05	1 Case Number				10 Crash Occurred On: 215 MADISON AVE										11 Speed Limit		13																																					
01	22-022026														10				118b																																			
01	2 Police Dept of				Code										12 Route No.		Suffix		13 Milepost		18 Speed Limit																																	
01	LAKEWOOD TOWNSHIP F01																																																					
01	3 Station/Precinct														19 Ramp		17 Cross Road Name		18 Speed Limit																																			
09	4 Date of Crash				5 Day Of Week				6 Time (use 2400 hrs)				7 Municipality Code		8 Total Killed		9 Total Injured		20 Route/Name		21 Latitude		22 Longitude		25																													
01	03/22/22				TUESDAY				1303				1514						40.092300		-74.216320				119b																													
04	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code				01																													
01	1				2014467664				073				2				PAA00002316914				963				120a																													
01	☐ Parked				☐ Ped				☐ Pedalcyclist				☐ Resp To Emergency				☐ Hit & Run				☒ Parked				☐ Ped				☐ Pedalcyclist				☐ Resp To Emergency				☐ Hit & Run				120b													
02	26 Driver's First Name				Initial				Last Name				29 Sex				56 Driver's First Name				Initial				Last Name				59 Sex				121a																					
01	JASBETH				-				LOPEZ				-				F				-				-				-				-				121b																	
01	27 Number & Street				State				Zip				57 Number & Street				State				Zip																																	
01	591 MARIA ST				NJ				08527				-				-				-				-																													
01	28 City				State				Zip				58 City				State				Zip																																	
01	JACKSON				NJ				08527				-				-				-				-																													
2	30 Eyes				DL Class				Restrictions				Endorsements				31 State				60 Eyes				DL Class				Restrictions				Endorsements				61 State				122													
01	01				D				-				-				NJ				-				-				-				-				-				09													
06	32 Driver's License Number				33 DOB				34 Expires				62 Driver's License Number				63 DOB				64 Expires				10																													
01	L65303880055991				05/23/1999				05				24				-				-																																	
06	35 Owner's First Name				Initial				Last Name				65 Owner's First Name				Initial				Last Name																																	
01	☐ Same As Driver				ANTONIO				-				LOPEZ-GIRON				☐ Same As Driver				IRENE				R				SLAMKA				-																					
01	36 Number & Street				State				Zip				66 Number & Street				State				Zip																																	
01	591 MARIA ST				NJ				08527				42 SEAVIEW AVE				NJ				08723																																	
05	37 City				State				Zip				67 City				State				Zip																																	
01	JACKSON				NJ				08527				BRICK				NJ				08723																																	
01	38 Make				39 Model				40 Color				41 Year				42 Plate No.				43 State				28																													
01	FORD				F15				RD				2015				J19PTK				NJ				28																													
01	44 VIN				45 Expires				74 VIN				75 Expires				10																																					
01	1FTFW1EFXFFA00637				03				23				KNADN4A31D6159502				01				23																																	
01	46 Vehicle Removed To				76 Vehicle Removed To																																																	
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01	☐ Left At Scene				☐ Towed Impounded				☐ Left At Scene				☐ Towed Impounded																																									
01	47 Authority				77 Authority																																																	
01	☐ Owner				☒ Driver				☐ Police				☒ Owner				☐ Driver				☐ Police				28																													
01	48 Alcohol/Drug Test				49 Hazardous Material				78 Alcohol/Drug Test				79 Hazardous Material				26																																					
01	Given: ☒ No				☐ Yes				☐ Refused				☒ None				☐ On Board				☐ Spill				26																													
01	Type: ☐ Breath				☐ Blood				☐ Urine				Type: ☐ Breath				☐ Blood				☐ Urine				-																													
01	Results: 0. - %				☐ Pending				Hazard Class				Placard No.				Results: 0. - %				☐ Pending				Hazard Class				Placard No.				127c																					
04	50 Carrier No.				51 GVWR/GCWR				80 Carrier No.				81 GVWR/GCWR				127d																																					
04	☐ USDOT				☒ None				☐ Weight <= 10,000 lbs				☐ Weight 10,001-26,000 lbs				☐ Weight >= 26,001 lbs				☐ USDOT				☒ None				☐ Weight <= 10,000 lbs				☐ Weight 10,001-26,000 lbs				☐ Weight >= 26,001 lbs				127e													
04	☐ MC/MX				☐ Weight <= 10,000 lbs				☐ Weight 10,001-26,000 lbs				☐ Weight >= 26,001 lbs				26																																					
04	52 Motor Carrier or Government Entity				82 Motor Carrier or Government Entity																																																	
04	Number & Street				Number & Street																																																	
04	City				State				Zip				City				State				Zip				03																													
04	135 Damage To Other Property				☐ Yes (If Yes, describe)				☒ No												03																																	
04	Oper.				136 Charge				137 Summons. No.				Oper.				138 Charge				139 Summons. No.				01																													
04	Oper.				140 Charge				141 Summons. No.				Oper.				142 Charge				143 Summons. No.				02																													
04	83				84				85				86				87				88				89				90				91				92				93				94				95				Names & Addresses of Occupants - If Deceased, Date & Time of Death	
04	1				01				01				05				22				F				-				-				-				11				04				-				-				JASBETH	
04	591 MARIA ST				JACKSON				NJ				08527																																									
04																																																						
04																																																						
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New Jersey Police Crash Investigation Report

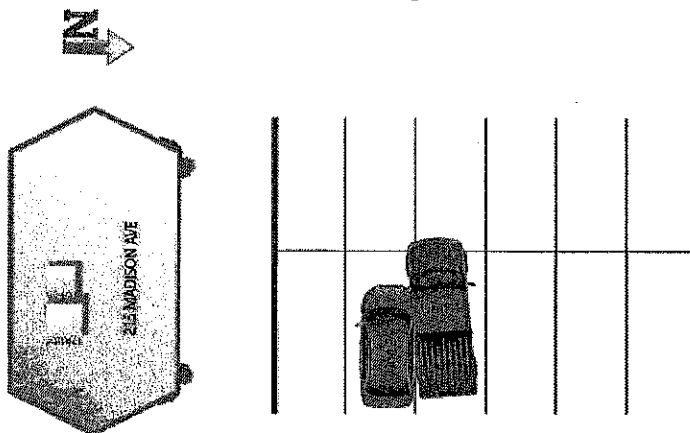
Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: _____ Case No: **22-022026**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)

Diagram Drawn Not To Scale



145 Crash Description/Narrative

VEHICLE 2 WAS PROPERLY PARKED IN A PARKING SPOT WHEN IT WAS STRUCK BY VEHICLE 1 WHICH WAS ATTEMPTING TO PARK.

DRIVER OF VEHICLE 1 STATED SHE WAS ATTEMPTING TO PARK HER VEHICLE WHEN SHE STRUCK VEHICLE 2.

NO INJURIES REPORTED ON SCENE.

146 Officer's Signature

VEGA E S

147 Badge #

348

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

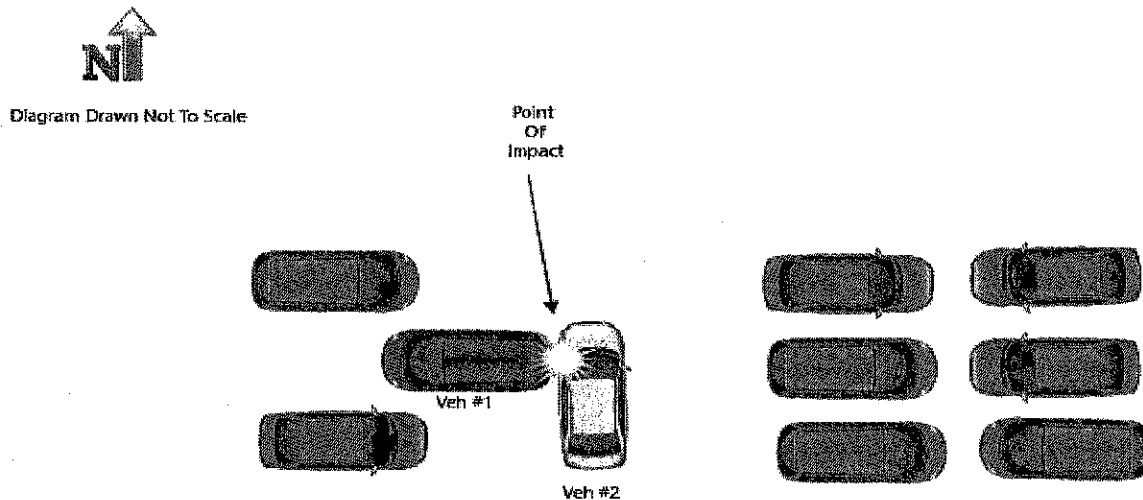
96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																																																																							
05	1 Case Number 22-022051										10 Crash Occurred On: 10 AMERICA AVE										11 Speed Limit 15		118a 10																																																																																																			
01	2 Police Dept of LAKEWOOD TOWNSHIP F01										Code										12 Route No.		13 Milepost		118b -																																																																																																	
01	3 Station/Precinct										14										15		16		119a 25																																																																																																	
09	4 Date of Crash 03/22/22										5 Day Of Week TUESDAY										6 Time 1507										7 Municipality Code 1514										8 Total Killed --										9 Total Injured --										10 Latitude 40.07940										11 Longitude -74.18316										119b -																																									
04	23 Veh # 1										24 Policy No. TCA00001015492										25 NJ Ins. Code 632										53 Veh # 2										54 Policy No. 943013889										55 NJ Ins. Code 134										01																																																													
02	26 Driver's First Name CHAIM										Initial D										Last Name MARDER										29 Sex M										56 Driver's First Name SOROH										Initial -										Last Name JERUSALEM										59 Sex F										01																																									
01	27 Number & Street 20 LEIGH DR										State NJ										Zip 08701										57 Number & Street 4 TUSCANY TER										State NJ										Zip 08701										121a -																																																													
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2	30 Eyes 4										DL Class D										Restrictions -										Endorsements -										31 State NJ										60 Eyes 6										DL Class D										Restrictions -										Endorsements -										61 State NJ										122 13																					
08	32 Driver's License Number M05671206410694										33 DOB 10/10/1969										34 Expires 10 25										62 Driver's License Number J27827200054936										63 DOB 04/25/1993										64 Expires 04 25										123 01																																																													
-	35 Owner's First Name CHAIM										Initial D										Last Name MARDER										65 Owner's First Name SHIMON										Initial -										Last Name JERUSALEM										124 -																																																													
-	36 Number & Street 20 LEIGH DR										State NJ										Zip 08701										66 Number & Street 4 TUSCANY TER										State NJ										Zip 08701										111 11																																																													
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01	38 Make TOYT										39 Model SIE										40 Color BLK										41 Year 2017										42 Plate No. D15KCA										43 State NJ										68 Make TOYT										69 Model AVA										70 Color WHI										71 Year 2013										72 Plate No. F68MTY										73 State NJ										26 26	
01	44 VIN 5TDKZ3DC5HS775178										45 Expires 06 22										74 VIN 4T1BK1EB0DU054184										75 Expires 08 22										126b -																																																																																	
01	46 Vehicle Removed To										76 Vehicle Removed To										126c -																																																																																																					
-	☒ Driven										☐ Towed Disabled										☐ Towed Disabled & Impounded										☒ Driven										☐ Towed Disabled										☐ Towed Disabled & Impounded										126d -																																																													
-	☐ Left At Scene										☐ Towed Impounded										☐ Left At Scene										☐ Towed Impounded										126e -																																																																																	
-	47 Authority ☒ Owner										☐ Driver										☐ Police										77 Authority ☐ Owner										☒ Driver										☐ Police										26 26																																																													
-	48 Alcohol/Drug Test Given: ☒ No										☐ Yes										☐ Refused										78 Alcohol/Drug Test Given: ☒ No										☐ Yes										☐ Refused										79 Hazardous Material ☒ None										☐ On Board										☐ Spill										127b -																															
-	Type: ☐ Breath										☐ Blood										☐ Urine										Type: ☐ Breath										☐ Blood										☐ Urine										Hazard Class										Placard No.										127c -																																									
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02	50 Carrier No. ☐ USDOT										☒ None										51 GVWR/GCWR ☐ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs										☐ Weight >= 26,001 lbs										80 Carrier No. ☐ USDOT										☒ None										81 GVWR/GCWR ☐ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs										☐ Weight >= 26,001 lbs										127e -																					
01	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity										128 -																																																																																																					
-	Number & Street										Number & Street										129 -																																																																																																					
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-	135 Damage To Other Property										☐ Yes (If Yes, describe)										☒ No										130 -																																																																																											
-	Oper.										136 Charge										137 Summons. No.										Oper.										138 Charge										139 Summons. No.										10 10																																																													
-	Oper.										140 Charge										141 Summons. No.										Oper.										142 Charge										143 Summons. No.										03 03																																																													
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New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-022051

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver #1 was backing out of a parking spot as driver #2 was passing him he backed in to her. Driver #2 was driving through the parking lot as driver #1 was backing out of a parking spot and struck her vehicle. No reported injuries at this time.

146 Officer's Signature

MERRILL D

147 Badge #

323

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																															
04	1 Case Number				22-022052										10 Crash Occurred On: RIVER AVE		11 Speed Limit 40		0009		08																													
01	2 Police Dept of				Code		LAKEWOOD TOWNSHIP R01										☒ At Intersection With		Road Name		Dir		12 Route No. Suffix 13 Milepost 18 Speed Limit																											
01	3 Station/Precinct																☐ Feet		☐ N ☐ E of: JAMES ST				40																											
02	4 Date of Crash				5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		19 Ramp		17 Cross Road Name		☐ NB ☐ EB																															
01	03/22/22				TUESDAY		1508		1514		--		--						☐ SB ☐ WB																															
04	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code				01																									
01	1				SEE NARRATIVE																																													
02	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run																																																	
01	26 Driver's First Name				Initial Last Name				29 Sex				56 Driver's First Name				Initial Last Name				59 Sex				121a																									
01	GARY				A FINNIGAN				-				M																-																					
01	27 Number & Street												57 Number & Street																121b																					
01	429 PINE ST																												-																					
01	28 City				State Zip								58 City				State Zip												-																					
01	TOMAH				WI 54660																								-																					
1	30 Eyes				DL Class				Restrictions				Endorsements				31 State				60 Eyes				DL Class				Restrictions				Endorsements				61 State				122									
1	HA				A												WI																								02									
11	32 Driver's License Number				33 DOB				34 Expires				62 Driver's License Number				63 DOB				64 Expires								123																					
11	F5252817721102				06/11/1977				06 25																								-																	
01	35 Owner's First Name				Initial Last Name								65 Owner's First Name				Initial Last Name												124																					
01	☐ Same As Driver				SCHNEIDER NATIO - CARRIERS INC								☐ Same As Driver																03																					
01	36 Number & Street												66 Number & Street																125																					
01	7101 W 17TH AVENUE																												-																					
01	37 City				State Zip								67 City				State Zip												126a																					
01	GARY				IN 46406																								56																					
01	38 Make				39 Model				40 Color				41 Year				42 Plate No.				43 State				68 Make				69 Model				70 Color				71 Year				72 Plate No.				73 State				126b	
01	FREI				TRK				WHI				2019				2514546				IN																												54	
02	44 VIN								45 Expires								74 VIN								75 Expires								126c																	
02	3AKJHHR2KSKC0044								03 22																								-																	
01	46 Vehicle Removed To												76 Vehicle Removed To																				126d																	
01	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded												☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded																126e																					
01	☐ Left At Scene ☐ Towed Impounded												☐ Left At Scene ☐ Towed Impounded																54																					
01	47 Authority				☐ Owner ☒ Driver ☐ Police								77 Authority				☐ Owner ☐ Driver ☐ Police												127a																					
01	48 Alcohol/Drug Test				Given: ☒ No ☐ Yes ☐ Refused				49 Hazardous Material				Given: ☐ No ☐ Yes ☐ Refused				79 Hazardous Material				Given: ☐ No ☐ Yes ☐ Refused								127b																					
01	Type: ☐ Breath ☐ Blood ☐ Urine								☒ None ☐ On Board ☐ Spill				Type: ☐ Breath ☐ Blood ☐ Urine								☐ None ☐ On Board ☐ Spill								127c																					
01	Results: 0. % ☐ Pending								Hazard Class				Placard No.				Results: 0. % ☐ Pending								Hazard Class				Placard No.				127d																	
03	50 Carrier No.				☐ USDOT 264184 ☐ None				51 GVWR/GCWR				☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☒ Weight >= 26,001 lbs				80 Carrier No.				☐ USDOT ☐ None				81 GVWR/GCWR				☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs								127e													
01	☐ MC/MX																☐ MC/MX																				54													
01	52 Motor Carrier or Government Entity				SCHNEIDER NATIONAL CARRIERS INC.								82 Motor Carrier or Government Entity																				128																	
01	Number & Street				7101 W 17TH AVE								Number & Street																				129																	
01	City				State Zip				IN 46406				City				State Zip												04																					
01	GARY																												130																					
01	135 Damage To Other Property				☒ Yes (If Yes, describe) ☐ No																								04																					
01	TRAFFIC LIGHT S/W CORNER OF INTERSECTION STRUCK, STATE DOT RESPONDED.																												131																					
01	Oper. 136 Charge				137 Summons. No.				Oper. 138 Charge				139 Summons. No.												132																									
01																									133																									
01	Oper. 140 Charge				141 Summons. No.				Oper. 142 Charge				143 Summons. No.												02																									
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A	83 84 85 86 87 88 89 90 91 92 93 94 95								Names & Addresses of Occupants - If Deceased, Date & Time of Death												135																													
A	01 01 01 05 44 M - - - 11 04 - -								GARY A FINNIGAN												-																													
B									429 PINE ST TOMAH WI 54660												-																													
C																																																		
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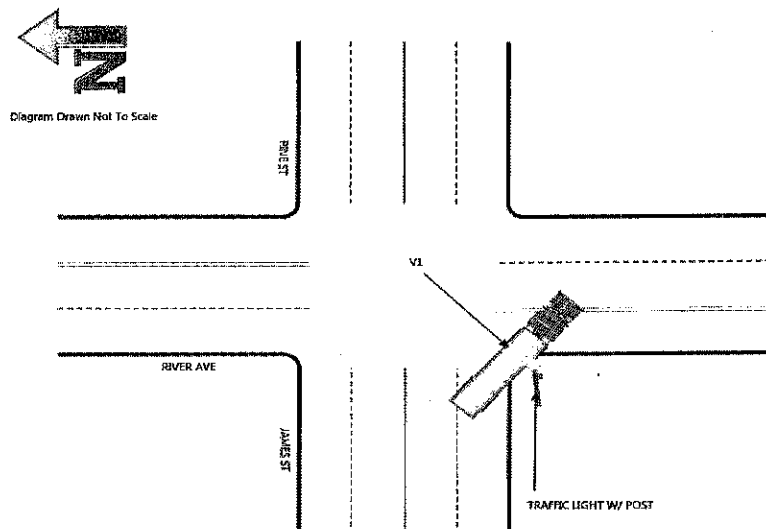
**New Jersey Police
Crash Investigation Report**

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-022052**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated he was traveling east on James Street when he made a right turn to go south on River Avenue. The driver stated due to traffic, he was unable to make a wide right turn and believed his trailer went up the curb. The driver stated he was unaware he had struck a traffic signal. Damage was minor to the trailer. No injuries were reported.

After my investigation it was determined that the driver of V1 is found to be at fault for making the right turn onto River Avenue without adequate room to turn.

Indiana Trailer registration: P499380.

V1 Insurance: Old Republic Insurance Company
 307 North Michigan Avenue, Chicago, IL. 60601.
 Policy: MTIT314557 20
 NAIC#: 24147

146 Officer's Signature

MEYER JR R

147 Badge #

401

148 Reviewer

DIBIASE

Badge #

286

149 Case Status

☐ Pending ☒ Complete

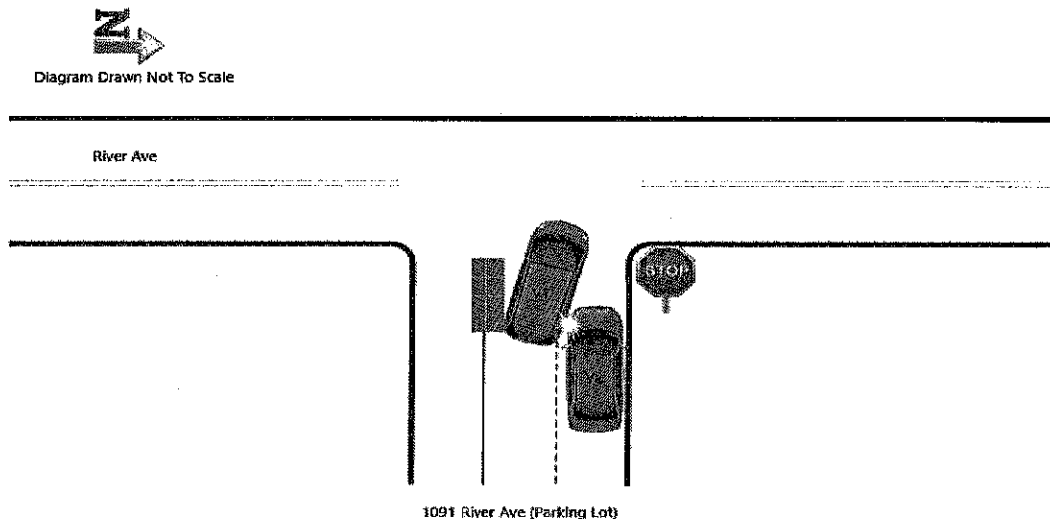
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-022076**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1 was at the stop sign waiting to turn onto River Avenue from the parking lot of 1091 River Avenue. **Vehicle 2** was approaching the stop sign on the right lane to conduct a right handed turn. **Vehicle 1** then conducted a right handed turn onto River Avenue from the left lane in the parking lot while doing so vehicle 1 struck vehicle two.

Driver 1 stated she was at the stop sign about to conduct a right handed turn from the parking lot of 1091 River Avenue onto River Avenue. When she was about to make the turn onto River Avenue she heard a horn and she stopped. **Vehicle 2** then came up on her right and struck the side of her vehicle when she was about to turn again.

Driver 2 stated he was going to the far right lane to exit the parking lot of 1091 River Avenue. He continued to state vehicle 1 was in the far left lane with her left turn signal on. While he was approaching vehicle 1 then turned on their right turn signal and to conduct a right handed turn from the left turning lane. **Vehicle 1** then struck vehicle 2.

Vehicle 1 obtained damage on the rear passenger side door along with paint transfer from vehicle 2. **Vehicle 2** obtained damage on the front driver side fender and the hood of the vehicle.

146 Officer's Signature

WEAVER G

147 Badge #

397

148 Reviewer

DIBIASE

Badge #

286

149 Case Status

☐ Pending ☒ Complete

PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										Reportable		Non-Reportable		Change Report																																																																																																																										
05	1 Case Number 22-022079										10 Crash Occurred On: HOPE CHAPEL RD										11 Speed Limit 40		0547		-		-																																																																																																																	
01	2 Police Dept of LAKEWOOD POLICE										Code 01		12 Route No.										Suffix		13 Milepost		18 Speed Limit 25																																																																																																																	
01	3 Station/Precinct -										250		14										15		16		17 Cross Road Name TORI CT		19 NB 20 EB																																																																																																															
05	4 Date of Crash mm dd yy 03/22/22										5 Day Of Week TUESDAY										6 Time (use 2400 hrs) 1754										7 Municipality Code 1514										8 Total Killed --										9 Total Injured --										21 Latitude 40.099830										22 Longitude -74.251960																																																																					
01	23 Veh # 1										24 Policy No. 6041400192061										25 NJ Ins. Code 189										53 Veh # 2										54 Policy No. 939652905										55 NJ Ins. Code 054																																																																																									
02	26 Driver's First Name BRACHA										Initial P										Last Name MURIK										29 Sex F										56 Driver's First Name YOSEF										Initial H										Last Name ASHLEM										59 Sex M																																																																					
01	27 Number & Street 23 SHONNY CT										State NJ										Zip 08701										57 Number & Street 446 BREWERS BRIDGE RD										State NJ										Zip 08527																																																																																									
01	28 City LAKEWOOD										30 Eyes 02										DL Class D										Restrictions -										Endorsements -										31 State NJ										60 Eyes 02										DL Class D										Restrictions -										Endorsements -										61 State NJ																																							
01	32 Driver's License Number M93670957759012										33 DOB mm dd yyyy 09/20/2001										34 Expires mm yy 09/23										62 Driver's License Number A80267906807822										63 DOB mm dd yyyy 07/17/1982										64 Expires mm yy 07/25																																																																																									
01	35 Owner's First Name SHRAGA										Initial F										Last Name MURIK										65 Owner's First Name YOSEF										Initial H										Last Name ASHLEM																																																																																									
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01	44 VIN 4T1BF1FK8HU449934										45 Expires 11/22										74 VIN KM8J2CA48KU064702										75 Expires 12/22																																																																																																													
01	46 Vehicle Removed To HESHY'S TOWING										49 Hazardous Material None										76 Vehicle Removed To MOISHY'S TOWING										79 Hazardous Material None																																																																																																													
01	47 Authority Owner										48 Alcohol/Drug Test Given: No										50 Carrier No. USDOT										51 GVWR/GCWR Weight <= 10,000 lbs										77 Authority Owner										78 Alcohol/Drug Test Given: No										80 Carrier No. USDOT										81 GVWR/GCWR Weight <= 10,000 lbs																																																																					
01	49 Hazardous Material None										50 Carrier No. USDOT										51 GVWR/GCWR Weight <= 10,000 lbs										79 Hazardous Material None										80 Carrier No. USDOT										81 GVWR/GCWR Weight <= 10,000 lbs																																																																																									
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01	116 Motor Carrier or Government Entity -																																																																																																																																											

**New Jersey Police
Crash Investigation Report**

Police Dept: **LAKEWOOD POLICE** Code: **01**Station: - Case No: **22-022079**

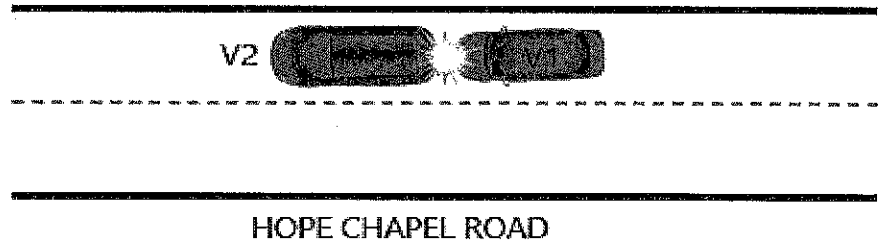
(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
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144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not To Scale



145 Crash Description/Narrative

Vehicle 1 struck vehicle 2 in the rear on Hope Chapel Road approximately 250 feet north east of Tori Court. Prior to the crash both vehicles were being driven south west.

Driver 1 states that there was an oncoming truck that entered her lane causing traffic to steer to the right side of the road and causing driver 2 to brake causing driver 1 to strike vehicle 2 in the rear. She states she glanced at her phone prior to striking vehicle 2.

Driver 2 states that there was a delivery truck parked on the north east side of the road. Due to this an oncoming truck entered driver 2's lane causing traffic to steer to the right side of the road causing Driver 2 to brake when he was struck in the rear by vehicle 1.

After my investigation I determined that driver 1 was at fault due to unsafe following distance and driver inattention.

146 Officer's Signature

CAMACHO L

147 Badge #

828

148 Reviewer

DIBIASE

Badge #

286

149 Case Status

☐ Pending ☒ Complete

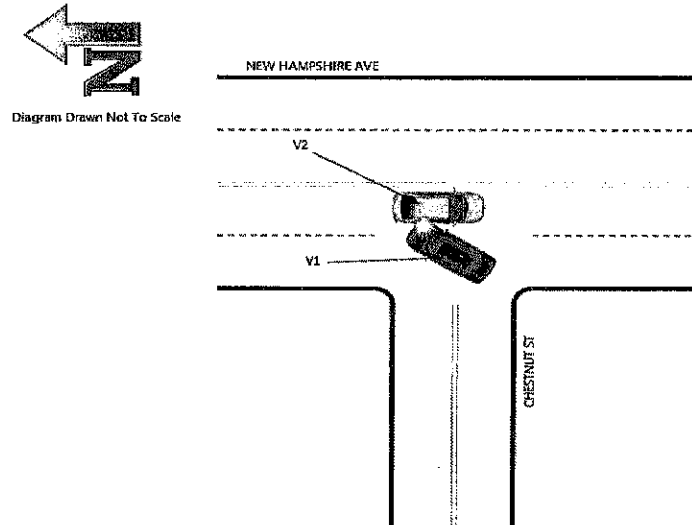
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-022081**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL F I N V O L V E D J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

The driver of V1 stated she just turned left onto New Hampshire Avenue, going north, off of Chestnut Street when she was struck. The driver stated the right most southbound lane on New Hampshire was clear but she could not see the left lane. Damage was to the passenger side headlight and front fender. No injuries were reported.

The driver of V2 was traveling in the left most southbound lane of New Hampshire when V1 entered his lane of travel and struck his vehicle. Damage was to his passenger rear door and wheel. No injuries were reported.

My investigation reveals: V2 was traveling south on New Hampshire Avenue. V1 disobeyed the stop sign on Chestnut Street specifically by entering the roadway when it was not safe to do so. The crash was avoidable. V1 is found to be at fault.

146 Officer's Signature

MEYER JR R

147 Badge #

401

148 Reviewer

DIBIASE

Badge #

286

149 Case Status

☐ Pending ☒ Complete

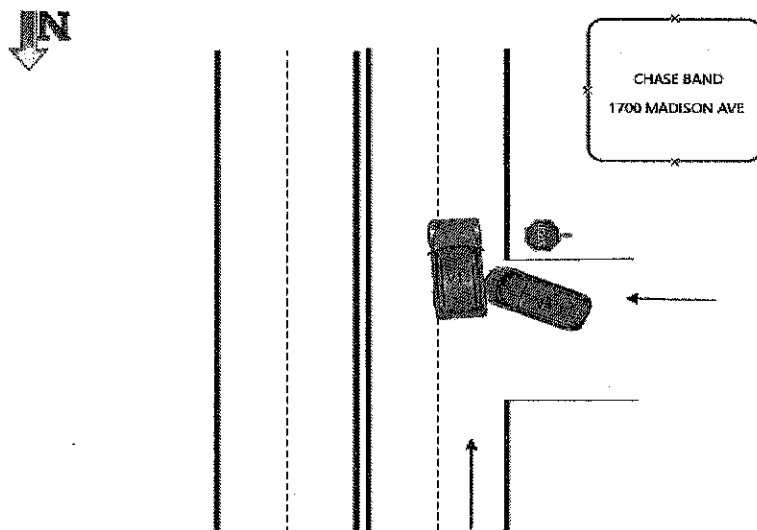
PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report		
96	01	1 Case Number		11 Speed Limit		118a
97	01	22-022091		45		25
98	01	2 Police Dept of		12 Route No.		118b
99	07	LAKEWOOD TOWNSHIP F01		-		-
00	01	3 Station/Preinct		13 Milepost		119a
01	02	4 Date of Crash		14		02
02	00a	03/22/22		15		04
03	01	5 Day Of Week		16		01
04	01	TUESDAY		17 Cross Road Name		02
05	01	6 Time (use 2400 hrs)		18 Speed Limit		04
06	01	1942		35		01
07	01	7 Municipality Code		21 Latitude		01
08	01	1514		40.08190		01
09	01	8 Total Killed		22 Longitude		01
10	01	--		-74.21565		01
11	01	9 Total Injured		23 Veh #		01
12	01	--		54 Policy No.		01
13	01	23 Veh #		602234940 206 1		01
14	01	24 Policy No.		884		01
15	01	6085-00-93-29		55 NJ Ins. Code		01
16	01	100		59 Sex		01
17	01	26 Driver's First Name		56 Driver's First Name		01
18	01	FIDELIA		ESTHER		01
19	01	27 Number & Street		57 Number & Street		01
20	01	43 ANCHORAGE BLVD		713 LAKEVIEW DR		01
21	01	28 City		58 City		01
22	01	BAYVILLE		LAKEWOOD		01
23	01	NJ 08721		NJ 08701		01
24	01	30 Eyes		60 Eyes		01
25	01	1		2		01
26	01	DL Class		DL Class		01
27	01	D		D		01
28	01	Restrictions		Restrictions		01
29	01	-		-		01
30	01	Endorsements		Endorsements		01
31	01	-		-		01
32	01	31 State		61 State		01
33	01	NJ		NJ		01
34	01	32 Driver's License Number		62 Driver's License Number		01
35	01	M29742630054801		T28072390062572		01
36	01	33 DOB		63 DOB		01
37	01	04/24/1980		12/04/1957		01
38	01	34 Expires		64 Expires		01
39	01	04		12		01
40	01	23		23		01
41	01	35 Owner's First Name		65 Owner's First Name		01
42	01	FIDELIA		ESTHER		01
43	01	36 Number & Street		66 Number & Street		01
44	01	43 ANCHORAGE BLVD		713 LAKEVIEW DR		01
45	01	37 City		67 City		01
46	01	BAYVILLE		LAKEWOOD		01
47	01	NJ 08721		NJ 08701		01
48	01	38 Make		68 Make		01
49	01	JEEP		HOND		01
50	01	39 Model		69 Model		01
51	01	G		HRV		01
52	01	40 Color		70 Color		01
53	01	6		SIL		01
54	01	41 Year		71 Year		01
55	01	2007		2021		01
56	01	42 Plate No.		72 Plate No.		01
57	01	A81PMH		A18NKS		01
58	01	43 State		73 State		01
59	01	NJ		NJ		01
60	01	44 VIN		74 VIN		01
61	01	1J8HR58207C698428		3CZRU6H38MM715649		01
62	01	45 Expires		75 Expires		01
63	01	10		02		01
64	01	22		24		01
65	01	46 Vehicle Removed To		76 Vehicle Removed To		01
66	01	47 Authority		77 Authority		01
67	01	48 Alcohol/Drug Test		78 Alcohol/Drug Test		01
68	01	49 Hazardous Material		79 Hazardous Material		01
69	01	50 Carrier No.		80 Carrier No.		01
70	01	51 GVWR/GCWR		81 GVWR/GCWR		01
71	01	52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity		01
72	01	53 Damage To Other Property		83 Damage To Other Property		01
73	01	54 Operator		84 Operator		01
74	01	55 Charge		85 Charge		01
75	01	56 Summons No.		86 Summons No.		01
76	01	57 Charge		87 Charge		01
77						

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-022091**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 1 STATED SHE WAS TRAVELING SOUTH ON MADISON AVENUE IN THE RIGHT LANE WHEN VEHICLE 2 MADE A RIGHT TURN OUT OF THE PARKING LOT OF 1700 MADISON AVENUE AND STRUCK VEHICLE 1'S LEFT REAR TIRE.

DRIVER OF VEHICLE 2 STATED SHE WAS TRAVLEING SOUTH ON MADISON AVENUE IN THE RIGHT LANE. THE TRAFFIC IN FRONT OF HER WAS "SLOW GOING" SO SHE PROCEEDED TO CHANGE INTO THE LEFT LANE. AS SHE WAS CHANGING LANES VEHICLE 1 STRUCK VEHICLE 2.

THIS INVESTIGATION DETERMINED THAT DRIVER 2 FAILED TO YEILD RIGHT OF WAY TO VEHICLE WHILE EXITING FROM A PARKING LOT.

146 Officer's Signature

SEUNATH K

147 Badge #

284

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																									
05	1 Case Number				22-022092										11 Speed Limit		40		118a		25																																							
97	2 Police Dept of				Code		LAKEWOOD TOWNSHIP #01										10 Crash Occurred On:		SQUANKUM RD		118b		-																																					
98	3 Station/Precinct				---		20		14		15		16		19		20		119a		02																																							
07	4 Date of Crash				5 Day of Week		6 Time		7 Municipality		8 Total		9 Total		21 Latitude		22 Longitude		119b		-																																							
99	03/22/22				TUESDAY		1957		1514		---		---		40.10878		-74.20195		120a		-																																							
100a	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code				01																																			
04	1				951087831				148				2				4617-05-42-69				100				01																																			
101	☐ Parked				☐ Ped				☐ Pedalcyclist				☐ Resp To Emergency				☐ Hit & Run				☐ Hit & Run				01																																			
02	26 Driver's First Name				Initial				Last Name				29 Sex				56 Driver's First Name				Initial				Last Name				59 Sex																															
102	YISROEL				-				FISCHER				-				M				ISRAEL				-				FELDHEIM				-		M																									
01	27 Number & Street				1241 46TH ST APT 3				57 Number & Street				14 LOUISBURG SQ				121a				01																																							
103	28 City				State				Zip				58 City				State				Zip				121b		01																																	
104	BROOKLYN				NY				11219				LAKEWOOD				NJ				08701				122		07																																	
2	30 Eyes				DL Class				Restrictions				Endorsements				31 State				60 Eyes				DL Class				Restrictions				Endorsements				61 State																							
105	2				I				-				-				NY				6				D				-				-				NJ				123		01																	
01	32 Driver's License Number				770734789				33 DOB				11/09/1994				34 Expires				11				22				62 Driver's License Number				F23633760001936				63 DOB				01/11/1993				64 Expires				01				23							
106	35 Owner's				First Name				Initial				Last Name				65 Owner's				First Name				Initial				Last Name				124		04																									
-	☐ Same As Driver				YISROEL				-				FISCHER				-				☐ Same As Driver				-				ARISTON CHIMNEY -				125		04																									
107	36 Number & Street				1241 46TH ST APT 3				66 Number & Street				200 CENTRAL AVE				126a				26																																							
108	37 City				State				Zip				67 City				State				Zip				126b		-																																	
01	BROOKLYN				NY				11219				FARMINGDALE				NJ				07727				126c		-																																	
109	38 Make				39 Model				40 Color				41 Year				42 Plate No.				43 State				68 Make				69 Model				70 Color				71 Year				72 Plate No.				73 State															
01	TES				MOD				BLK				2020				U83MTK				NJ				TOYT				RAV				BLK				2013				W66DYU				NJ															
110	44 VIN				5YJYGDEE3LF032327				45 Expires				08				24				74 VIN				2T3DFREV3DW114987				75 Expires				12				22																							
111	46 Vehicle Removed To				MOISHY'S AUTO				76 Vehicle Removed To				126d				-																																											
112	☐ Driven				☐ Towed Disabled				☐ Towed Disabled & Impounded				☐ Driven				☒ Towed Disabled				☐ Towed Disabled & Impounded				126e		-																																	
-	☒ Left At Scene				☐ Towed Impounded				☐ Left At Scene				☐ Towed Impounded				126f		-																																									
113	47 Authority				☒ Owner				☐ Driver				☐ Police				77 Authority				☐ Owner				☒ Driver				☐ Police				127a		26																									
114	48 Alcohol/Drug Test				Given: ☒ No				☐ Yes				☐ Refused				78 Alcohol/Drug Test				Given: ☒ No				☐ Yes				☐ Refused				127b		-																									
115	Type: ☐ Breath				☐ Blood				☐ Urine				Type: ☐ Breath				☐ Blood				☐ Urine				127c		-																																	
116	Results: 0, - %				☐ Pending				Hazard Class				Placard No.				Results: 0, - %				☐ Pending				Hazard Class				Placard No.				127d		-																									
01	50 Carrier No.				☐ USDOT				☒ None				51 GVWR/GCWR				☒ Weight <= 10,000 lbs				☐ Weight 10,001-26,000 lbs				☐ Weight >= 26,001 lbs				127e		-																													
117	☐ MC/MX				☐ MC/MX				☐ MC/MX				☐ MC/MX				☐ MC/MX				☐ MC/MX				☐ MC/MX				127f		26																													
01	52 Motor Carrier or Government Entity				82 Motor Carrier or Government Entity				128		26																																																	
	Number & Street				Number & Street				129		06																																																	
	City				State				Zip				City				State				Zip				130		06																																	
	135 Damage To Other Property				☐ Yes (If Yes, describe)				☒ No				131		12																																													
	Oper.				136 Charge				137 Summons. No.				Oper.				138 Charge				139 Summons. No.				132		12																																	
	Oper.				140 Charge				141 Summons. No.				Oper.				142 Charge				143 Summons. No.				133		04																																	
	83				84				85				86				87				88				89				90				91				92				93				94				95				Names & Addresses of Occupants - If Deceased, Date & Time of Death		134		04			
A	1				01				01				05				27				M				-				-				-				11				04				-				-				YISROEL		-		FISCHER		-	
B	2				01				01				05				29				M				-				-				-				11				11				02				-				ISRAEL		-		FELDHEIM		-	
C																																																												
D																																																												

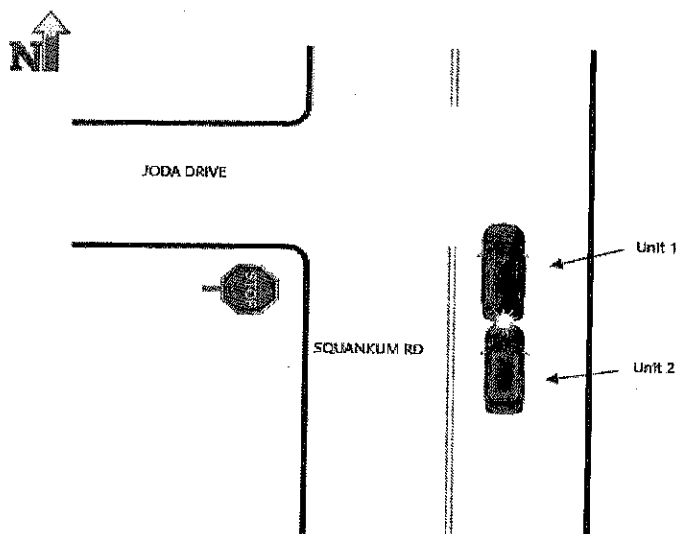
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **--** Case No: **22-022092**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
I														
N														
V														
O														
L														
V														
E														
I														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER #1 STATED THAT HE WAS STOPPED ON SQUANKUM ROAD FACING NORTH WAITING TO MAKE A LEFT TURN ONTO JODA DRIVE, WHEN VEHICLE #2 TRAVELING NORTH ON SQUANKUM ROAD STRUCK VEHICLE #1 FROM BEHIND. DRIVER #1 ALSO STATED THAT HE HAD HIS LEFT TURN SIGNAL ON. DRIVER #2 STATED THAT HE WAS TRAVELING NORTH ON SQUANKUM ROAD AND STRUCK VEHICLE #1 FROM BEHIND. DRIVER #2 STATED THAT HE DID NOT SEE VEHICLE #1'S LEFT TURN SIGNAL ON. NO INJURIES REPORTED.

146 Officer's Signature

RIVERA F

147 Badge #

294

148 Reviewer

DIBIASE

Badge #

286

149 Case Status

☐ Pending☒ Complete

New Jersey Police Crash Investigation Report

☒ Reportable ☐ Non-Reportable ☐ Change Report

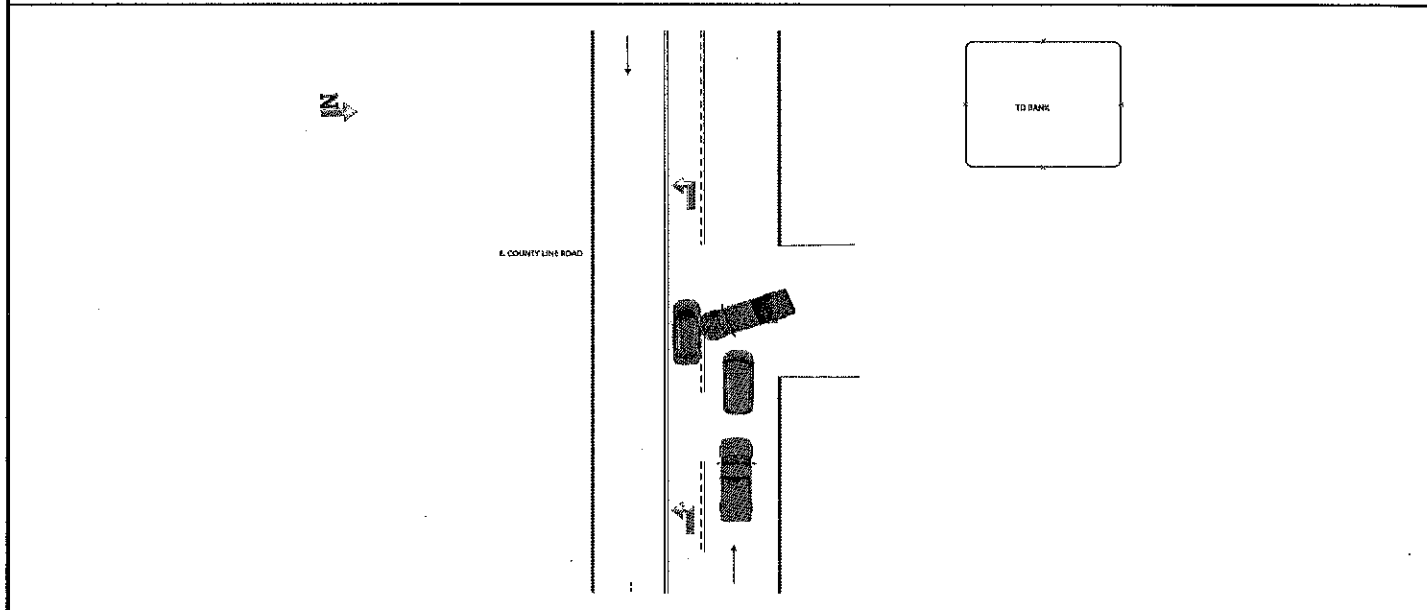
PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
05	1 Case Number 22-020096		10 Crash Occurred On: E COUNTY LINE ROAD		11 Speed Limit 40
01	2 Police Dept of LAKEWOOD TOWNSHIP F01		12 Route No. 13 Milepost 150 45		18 Speed Limit 45
01	3 Station/Precinct		14 15 16		19 20
05	4 Date of Crash 03/15/22		5 Day Of Week TUESDAY		6 Time 0855
01	7 Municipality Code 1514		8 Total Killed --		9 Total Injured --
01	23 Veh # 1		24 Policy No. 6022426675 206 1		25 NJ Ins. Code 884
04	26 Driver's First Name CHANA		27 Number & Street 746 SOMERSET AVE		28 City LAKEWOOD
02	29 Sex F		30 Eyes 5		31 State NJ
01	32 Driver's License Number F75411200059945		33 DOB 09/20/1994		34 Expires 09 24
01	35 Owner's First Name ISRAEL		36 Number & Street 16 12TH ST		37 City LAKEWOOD
05	38 Make NISS		39 Model ALT		40 Color BLK
01	41 Year 2008		42 Plate No. LUG99E		43 State NJ
01	44 VIN 1N4AL21EX8N455007		45 Expires 08 22		46 Vehicle Removed To
01	47 Authority Owner		48 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0. % Pending		49 Hazardous Material None On Board Spill Hazard Class Placard No.
04	50 Carrier No. USDOT MC/MX		51 GVWR/GCWR Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs		52 Motor Carrier or Government Entity
01	53 Veh # 2		54 Policy No. 2013882104		55 NJ Ins. Code
01	56 Driver's First Name GERSON		57 Number & Street 174 COVENTRY DRIVE		58 City LAKEWOOD
01	59 Sex M		60 Eyes 02		61 State NJ
01	62 Driver's License Number -		63 DOB 01/29/2994		64 Expires - -
01	65 Owner's First Name GERSON		66 Number & Street 174 COVENTRY DRIVE		67 City LAKEWOOD
05	68 Make NISSAN		69 Model TITAN		70 Color BK
01	71 Year 2005		72 Plate No. UGY9835		73 State VA
01	74 VIN 1N6BA06AX5N546172		75 Expires 09 23		76 Vehicle Removed To
01	77 Authority Owner		78 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0. % Pending		79 Hazardous Material None On Board Spill Hazard Class Placard No.
01	80 Carrier No. USDOT MC/MX		81 GVWR/GCWR Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs		82 Motor Carrier or Government Entity
01	83		84		85
01	86		87		88
01	89		90		91
01	92		93		94
01	95		96		97
01	98		99		100
01	101		102		103
01	104		105		106
01	107		108		109
01	110		111		112
01	113		114		115
01	116		117		118
01	119		120		121
01	122		123		124
01	125		126		127
01	128		129		130
01	131		132		133
01	134		135		136
01	137		138		139
01	140		141		142
01	143		144		145
01	146		147		148
01	149		150		151
01	152		153		154
01	155		156		157
01	158		159		160
01	161		162		163
01	164		165		166
01	167		168		169
01	170		171		172
01	173		174		175
01	176		177		178
01	179		180		181
01	182		183		184
01	185		186		187
01	188		189		190
01	191		192		193
01	194		195		196
01	197		198		199
01	200		201		202
01	203		204		205
01	206		207		208
01	209		210		211
01	212		213		214
01	215		216		217
01	218		219		220
01	221		222		223
01	224		225		226
01	227		228		229
01	230		231		232
01	233		234		235
01	236		237		238
01	239		240		241
01	242		243		244
01	245		246		247
01	248		249		250
01	251		252		253

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01
Station: _____ Case No: 22-020096

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL IF INVOLVED J	83	84	85	86	87	88	89	90	91	92	93	94	95	
	01	01	01	05	27	F	-	-	-	11	04	-	-	CHANA - FROMMER 746 SOMERSET AVE LAKEWOOD NJ 08701
	01	04	01	05	02	M	-	-	-	05	05	-	-	PERELE FROMMER 746 SOMERSET AVE LAKEWOOD NJ 08701
	01	06	01	05	01	M	-	-	-	05	05	-	-	SHMUEL FROMMER 746 SOMERSET AVE LAKEWOOD NJ 08701
	02	01	01	05	28	M	-	-	-	11	04	-	-	GERSON O DOZUE-ZACARIAS 174 COVENTRY DR LAKEWOOD NJ 08701
	02	01	01	05	26	F	-	-	-	11	04	-	-	DEYSI GUERRA 174 COVENTRY DR LAKEWOOD NJ 08701

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 1 STATED SHE WAS ON E. COUNTY LINE ROAD TRAVELING WEST IN THE LEFT TURN LANE WHEN VEHICLE 2 MADE A LEFT TURN FROM THE TD BANK PARKING LOT AND STRUCK VEHICLE 1.

DRIVER OF VEHICLE 2 STATED HE WAS STOPPED AT THE TD BANK PARKING LOT WAITING TO MAKE A LEFT TURN ONTO E. COUNTY LINE ROAD. THE TRAFFIC TRAVELING WEST ON E. COUNTY LINE ROAD WAS BUMPER TO BUMPER. HE PROCEEDED TO MAKE A LEFT TURN AFTER A UNKNOWN DRIVER CREATED A GAP BETWEEN CARS AND WAIVED HIM THROUGH. AS HE WAS TURNING HE STRUCK VEHICLE 1 WHICH HE SAID WAS SPEEDING.

THIS INVESTIGATION DETERMINED THAT VEHICLE 2 MADE A UNSAFE LEFT TURN.

BOX #55: VIRGINIA AUTOMOBILE INSURANCE CARD
PO BOX 3199 WINSTON SALEM, NC 27102-3199
(888) 672-6999

146 Officer's Signature
SEUNATH K147 Badge #
284148 Reviewer
EMBadge #
288149 Case Status
☐ Pending ☒ Complete

New Jersey Police Crash Investigation Report

☐ Reportable ☐ Non-Reportable ☒ Change Report

1 Case Number 22-020096	10 Crash Occurred On:	11 Speed Limit	118a
2 Police Dept of LAKEWOOD TOWNSHIP	Code 01	12 Route No.	118b
3 Station/Precinct	13 Milepost	18 Speed Limit	119a
4 Date of Crash mm dd yy 03/15/22	5 Day Of Week TUESDAY	6 Time (use 2400 hrs) 0855	119b
7 Municipality Code 1514	8 Total Killed	9 Total Injured	120a
14	15	16	120b
23 Veh #	24 Policy No.	25 NJ Ins. Code	121a
26 Driver's First Name CHANA	Initial -	Last Name FROMMER	121b
27 Number & Street	28 City	State Zip	122
29 Sex	30 Eyes	DL Class	123
31 State	Restrictions	Endorsements	124
32 Driver's License Number	33 DOB mm dd yyyy	34 Expires mm yy	125
35 Owner's First Name JACOB	Initial -	Last Name FROMMER	126a
36 Number & Street 929 W KENNEDY BLVD	37 City LAKEWOOD	State Zip NJ 08701	126b
38 Make TOYT	39 Model CAM	40 Color 3	126c
41 Year 2011	42 Plate No. R36EBB	43 State NJ	126d
44 VIN 4T4BF3EK4BR117130	45 Expires 03 23	46 Vehicle Removed To	127a
47 Authority ☐ Owner ☐ Driver ☐ Police	48 Alcohol/Drug Test Given: ☐ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. % ☐ Pending	49 Hazardous Material ☐ None ☐ On Board ☐ Spill Hazard Class Placard No.	127b
50 Carrier No. ☐ USDOT ☐ None ☐ MC/MX	51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	52 Motor Carrier or Government Entity	127c
53 Veh #	54 Policy No.	55 NJ Ins. Code	127d
56 Driver's First Name GERSON	Initial O	Last Name DUQUE-ZACARIAS	127e
57 Number & Street	58 City	State Zip	128
59 Sex	60 Eyes	DL Class	129
61 State	Restrictions	Endorsements	130
62 Driver's License Number	63 DOB mm dd yyyy 01/29/1994	64 Expires mm yy	131
65 Owner's First Name	Initial	Last Name	132
66 Number & Street	67 City	State Zip	133
68 Make	69 Model	70 Color	134
71 Year	72 Plate No.	73 State	
74 VIN	75 Expires	76 Vehicle Removed To	
77 Authority ☐ Owner ☐ Driver ☐ Police	78 Alcohol/Drug Test Given: ☐ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. % ☐ Pending	79 Hazardous Material ☐ None ☐ On Board ☐ Spill Hazard Class Placard No.	
80 Carrier No. ☐ USDOT ☐ None ☐ MC/MX	81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	82 Motor Carrier or Government Entity	
83	84	85	
86	87	88	
89	90	91	
92	93	94	
95	Names & Addresses of Occupants - If Deceased, Date & Time of Death		
135 Damage To Other Property ☐ Yes (If Yes, describe) ☐ No			
Oper.	136 Charge	137 Summons. No.	Oper.
Oper.	140 Charge	141 Summons. No.	Oper.
138 Charge		139 Summons. No.	
142 Charge		143 Summons. No.	

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-020096**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
L														
L														
E														
I														
N														
V														
O														
L														
H														
I														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)

145 Crash Description/Narrative

ON 3/23/2022 I OFFICER SEUNATH #284 MADE CORRETIONS TO BOX'S 35-45 AND BOX 63.

146 Officer's Signature

PTL. K. SEUNATH

147 Badge #

284

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

STATE OF NEW JERSEY
MOTOR VEHICLE CRASH DESCRIPTION

Police Agency **LAKEWOOD TOWNSHIP POLICE DEPT.**Case No. **22-020096**
Station _____

- | | | |
|-----|----------|--------------|
| 1. | FAIGA | GOLDBERG |
| 2. | ZLATA | MANNES |
| 3. | MALKA | WESTREICH |
| 4. | DEVORA | CITRONENBAUM |
| 5. | SARAH | LEVIN |
| 6. | ROCHEL | HERZKA |
| 7. | ESTHER | SHALOM |
| 8. | ETSY | GOLDBERG |
| 9. | MIRIAM | GODBERG |
| 10. | SHOSHANA | BARAN |
| 11. | FAIGY | FUERST |
| 12. | HADASSAH | JACOB |
| 13. | NECHAMA | NEUMANN |
| 14. | SHAINA | HAUPTMAN |
| 15. | SARA | LEVY |
| 16. | LEAH | GARTENHAUS |
| 17. | SHAINDY | ABRAHAMSON |
| 18. | YEHUDIS | BURSZTYN |
| 19. | BROCHA | ADLER |
| 20. | RIVKKA | NEWHOUSE |
| 21. | CHAVA | GREENBERG |
| 22. | CHASSIDA | EINHORN |
| 23. | TEHILA | ABRAMSKY |
| 24. | CHAYA | STERN |
| 25. | | |
| 26. | | |
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SCHOOL BUS
(full size)

● DRIVER			DOOR →	
1	2	3	4	5
6	7	8	9	10
11	12	13	14	15
16	17	18	19	20
21	22	23	24	25
26	27	28	29	30
31	32	33	34	35
36	37	38	39	40
41	42	43	44	45
46	47	48	49	50
51	52		53	54

MINIBUS

● DRIVER			DOOR →	
1	2		3	4
5	6		7	8
9	10		11	12
13	14		15	16

PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report	
05	1 Case Number		22-021002		10 Crash Occurred On:		CROSS STREET		11 Speed Limit		45		118a		09				
01	2 Police Dept of		LAKEWOOD POLICE		Code		01		12 Route No.		Suffix		13 Milepost		18 Speed Limit				
01	3 Station/Precinct		-		0.1		Miles		14		15		16		17 Cross Road Name				
05	4 Date of Crash		mm dd yy		5 Day Of Week		FRIDAY		6 Time (use 2400 hrs)		1551		7 Municipality Code		1514				
01	8 Total Killed		--		9 Total Injured		2		21 Latitude		40.078820		22 Longitude		-74.253680				
04	23 Veh #		1		24 Policy No.		949992972		25 NJ Ins. Code		135		53 Veh #		54 Policy No.				
01	26 Driver's First Name		Initial		Last Name		RUBEN		29 Sex		M		56 Driver's First Name		Initial				
01	27 Number & Street		484 COOK RD		28 City		JACKSON		State		NJ		57 Number & Street		1854 E 8TH ST				
01	29 Zip		08527		30 Eyes		02		DL Class		D		31 State		NJ				
01	32 Driver's License Number		G64596760008032		33 DOB		mm dd yyyy		08/19/2003		34 Expires		mm dd yyyy		08/15/2003				
01	35 Owner's First Name		Initial		Last Name		RUBEN		36 Number & Street		484 COOK RD		37 City		JACKSON				
01	38 Make		JET - JE		39 Model		BLK		40 Color		2017		41 Year		W44NVU				
01	42 Plate No.		NJ		43 State		NJ		44 VIN		3VWDB7AJ5HM374220		45 Expires		06/22				
01	46 Vehicle Removed To		EL ANDRAIEGO		47 Authority		Owner		48 Alcohol/Drug Test		Given: No		49 Hazardous Material		None				
01	49 Hazardous Material		None		50 Carrier No.		USDOT		51 GVWR/GCWR		Weight <= 10,000 lbs		52 Motor Carrier or Government Entity		-				
01	50 Carrier No.		USDOT		51 GVWR/GCWR		Weight <= 10,000 lbs		52 Motor Carrier or Government Entity		-		53 Veh #		1				
01	51 GVWR/GCWR		Weight <= 10,000 lbs		52 Motor Carrier or Government Entity		-		53 Veh #		1		54 Policy No.		949992972				
01	52 Motor Carrier or Government Entity		-		53 Veh #		1		54 Policy No.		949992972		55 NJ Ins. Code		135				
01	53 Veh #		1		54 Policy No.		949992972		55 NJ Ins. Code		135		56 Driver's First Name		Initial				
01	54 Policy No.		949992972		55 NJ Ins. Code		135		56 Driver's First Name		Initial		Last Name		RUBEN				
01	55 NJ Ins. Code		135		56 Driver's First Name		Initial		Last Name		RUBEN		29 Sex		M				
01	56 Driver's First Name		Initial		Last Name		RUBEN		29 Sex		M		57 Number & Street		1854 E 8TH ST				
01	57 Number & Street		1854 E 8TH ST		58 City		JACKSON		State		NJ		59 State		NJ				
01	58 City		JACKSON		59 State		NJ		60 Eyes		02		DL Class		D				
01	59 State		NJ		60 Eyes		02		DL Class		D		61 State		NJ				
01	60 Eyes		02		61 State		NJ		62 Driver's License Number		G64596760008032		63 DOB		mm dd yyyy				
01	61 State		NJ		62 Driver's License Number		G64596760008032		63 DOB		mm dd yyyy		64 Expires		mm dd yyyy				
01	62 Driver's License Number		G64596760008032		63 DOB		mm dd yyyy		64 Expires		mm dd yyyy		65 Owner's First Name		Initial				
01	63 DOB		mm dd yyyy		64 Expires		mm dd yyyy		65 Owner's First Name		Initial		Last Name		RUBEN				
01	64 Expires		mm dd yyyy		65 Owner's First Name		Initial		Last Name		RUBEN		36 Number & Street		484 COOK RD				
01	65 Owner's First Name		Initial		Last Name		RUBEN		36 Number & Street		484 COOK RD		37 City		JACKSON				
01	66 Number & Street		1854 E 8TH ST		67 City		BROOKLYN		State		NY		68 Make		VOLV				
01	67 City		BROOKLYN		68 Make		VOLV		69 Model		S60		70 Color		BLK				
01	68 Make		VOLV		69 Model		S60		70 Color		BLK		71 Year		2022				
01	69 Model		S60		70 Color		BLK		71 Year		2022		72 Plate No.		KTW5054				
01	70 Color		BLK		71 Year		2022		72 Plate No.		KTW5054		73 State		NY				
01	71 Year		2022		72 Plate No.		KTW5054		73 State		NY		74 VIN		7JRL12FZ9NG173950				
01	72 Plate No.		KTW5054		73 State		NY		74 VIN										

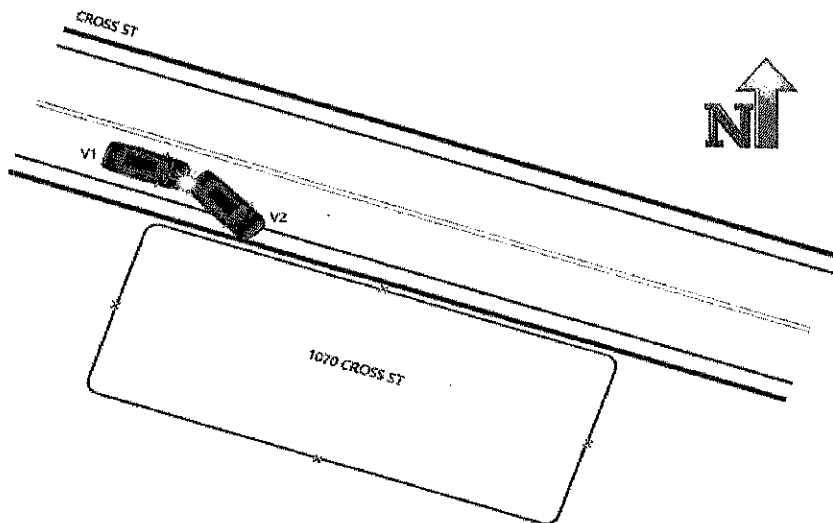
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD POLICE** Code: **01**
 Station: - Case No: **22-021002**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V2 insurance: NY code 478 (Allstate) 1-800-255-7828

V1 struck V2 from behind on Cross Street, near the driveway of 1070. Prior to the crash Driver 2 was attempting to turn right into the driveway, while V1 was immediately behind him.

Driver 1 stated that V2 turned without signaling and he was unable to avoid a collision. Driver 1 had an injury to his left hand but declined EMS.

Driver 2 said that he was going a little slow on Cross Street and V1 was tailgating him. He said that he was struck from behind as he started to turn. When asked if he was injured, Driver 2 said he only had a headache.

Driver 1 is responsible due to insufficient following distance.

146 Officer's Signature

BURKHARDT B

147 Badge #

361

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
05	1 Case Number		10 Crash Occurred On: 101 CHASE AVE		11 Speed Limit 15
97	22-021765		☐ At Intersection With Road Name Dir		12 Route No. Suffix 13 Milepost 18 Speed Limit
01	2 Police Dept of LAKEWOOD TOWNSHIP F01		☐ Feet ☐ N ☐ E of: ☐ S ☐ W		17 Cross Road Name
98	3 Station/Precinct		☐ Miles		19 Ramp To From: 20 Route/Name
01	4 Date of Crash 03/21/22		5 Day Of Week MONDAY		6 Time (use 2400 hrs) 1343
99	7 Municipality Code 1514		8 Total Killed --		9 Total Injured --
09	23 Veh # 1		24 Policy No. 4617-78-48-57		25 NJ Ins. Code 100
100a	26 Driver's First Name NAOR		27 Number & Street 11 FORD AVE		28 City LAKEWOOD NJ 08701
01	29 Sex M		30 Eyes 2		31 State NJ
100b	32 Driver's License Number C33445800006012		33 DOB 06/01/2001		34 Expires 06/26
04	35 Owner's First Name AVRAHAM		36 Number & Street 11 FORD AVE		37 City LAKEWOOD NJ 08701
101	38 Make NISS		39 Model MUR		40 Color GRY
02	41 Year 2010		42 Plate No. S16LNY		43 State NJ
102	44 VIN JN8AZ1MW6AW112545		45 Expires 07/22		46 Vehicle Removed To
01	47 Authority ☒ Driver		48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused		49 Hazardous Material ☐ None ☐ On Board ☐ Spill
105	50 Carrier No. ☐ USDOT ☐ MC/MX		51 GVWR/GCWR ☐ Weight <= 10,000 lbs		52 Motor Carrier or Government Entity
06	53 Veh # 2		54 Policy No. 4628-04-61-97		55 NJ Ins. Code 148
106	56 Driver's First Name RIVKA		57 Number & Street 1032 6TH AVE		58 City TOMS RIVER NJ 08757
107	59 Sex -		60 Eyes -		61 State NJ
108	62 Driver's License Number -		63 DOB -		64 Expires -
109	65 Owner's First Name RIVKA		66 Number & Street 1032 6TH AVE		67 City TOMS RIVER NJ 08757
110	68 Make TOYT		69 Model CAM - CA		70 Color 1
111	71 Year 2019		72 Plate No. R69MSE		73 State NJ
112	74 VIN 4T1B11HK1KU790577		75 Expires 08/22		76 Vehicle Removed To
113	77 Authority ☒ Owner		78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused		79 Hazardous Material ☐ None ☐ On Board ☐ Spill
114	80 Carrier No. ☐ USDOT ☐ MC/MX		81 GVWR/GCWR ☐ Weight <= 10,000 lbs		82 Motor Carrier or Government Entity
115	83		84		85
116	86		87		88
117	89		90		91
118	92		93		94
119	95		96		97
120	98		99		100
121	101		102		103
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124	110		111		112
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163	227		228		229
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169	245		246		

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-021765**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not To Scale



PARKING LOT OF 101 CHASE AVE

145 Crash Description/Narrative

Driver 1 stated that as he was traveling East through the parking lot of 101 Chase Avenue when he noticed another vehicle headed his direction traveling West. Driver 1 moved over to the right because there were vehicles parked on both sides of the road making it difficult to maneuver in the parking lot and struck parked vehicle 2. Vehicle 2 was occupied by the registered owner who stated that she was sitting in her parked vehicle when vehicle 1 struck her vehicle as he was maneuvering in the parking lot. The collision was caused due to driver 1 inattention to vehicle 2's location as he was passing the parked car and making space for the other vehicle no identified traveling in the parking lot also. No injuries reported.

146 Officer's Signature

VEGA E

147 Badge #

311

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending☒ Complete

96	PAGE 1 OF 3		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report				
05	1 Case Number		22-022058		10 Crash Occurred On: W COUNTY LINE ROAD		11 Speed Limit 45		118a
01	2 Police Dept of		LAKEWOOD TOWNSHIP F01		12 Route No. 13 Milepost		18 Speed Limit 25		118b
01	3 Station/Precinct				14 At Intersection With Road Name		17 Cross Road Name		119a
05	4 Date of Crash		03/22/22		5 Day Of Week		TUESDAY		119b
100a	6 Time (use 2400 hrs)		1603		7 Municipality Code		1514		04
01	8 Total Killed		--		9 Total Injured		--		119b
100b	23 Veh #		1		24 Policy No.		4552638277		120a
06	25 NJ Ins. Code		148		53 Veh #		2		01
101	54 Policy No.		BA2997BD		55 NJ Ins. Code		149		120b
02	26 Driver's First Name		PELLE		56 Driver's First Name		LUANN		01
01	27 Number & Street		306 AUTUMN ROAD		57 Number & Street		56 SEELEY AVE		121a
01	28 City		LAKEWOOD		58 City		KEANSBURG		121b
104	29 Sex		M		59 Sex		F		01
2	30 Eyes		2		60 Eyes		4		122
105	31 State		NJ		61 State		NJ		01
07	32 Driver's License Number		K74506226408012		62 Driver's License Number		R40784900055704		123
106	33 DOB		08/28/2001		63 DOB		05/28/1970		03
107	34 Expires		08		64 Expires		05		124
108	35 Owner's First Name		YAACOV		65 Owner's First Name		JAYS BUS SERVICE		04
109	36 Number & Street		306 AUTUMN ROAD		66 Number & Street		672 CROSS ST		125
01	37 City		LAKEWOOD		67 City		LAKEWOOD		08
01	38 Make		ACUR		68 Make		THO		126a
31	39 Model		TLX		69 Model		310		26
01	40 Color		WHI		70 Color		YEL		126b
01	41 Year		2018		71 Year		2018		-
01	42 Plate No.		Y42KHU		72 Plate No.		L959S1		126c
01	43 State		NJ		73 State		NJ		-
02	44 VIN		19UUB2F32JA004167		74 VIN		4UZABRDU0JCJG1360		127a
02	45 Expires		08		75 Expires		09		127b
02	46 Vehicle Removed To		PRIVATE TOW		76 Vehicle Removed To		PRIVATE TOW		127c
112	47 Authority		Owner		77 Authority		Owner		127d
09	48 Alcohol/Drug Test		Given: No		78 Alcohol/Drug Test		Given: No		127e
01	49 Hazardous Material		None		79 Hazardous Material		None		26
04	50 Carrier No.		USDOT		80 Carrier No.		1926134		127f
03	51 GVWR/GCWR		Weight <= 10,000 lbs		81 GVWR/GCWR		Weight <= 10,000 lbs		128
	52 Motor Carrier or Government Entity		-		82 Motor Carrier or Government Entity		-		129
	53 Number & Street		-		83 Number & Street		-		130
	54 City		-		84 City		-		131
	55 State		-		85 State		-		10
	56 Zip		-		86 Zip		-		132
	57 Damage To Other Property		Yes (If Yes, describe)		87 Damage To Other Property		Yes (If Yes, describe)		133
	58 Operator		136 Charge		88 Operator		138 Charge		04
	59 Operator		140 Charge		89 Operator		142 Charge		134
	60 Operator		141 Summons. No.		90 Operator		143 Summons. No.		04
	61 Operator		144 Summons. No.		91 Operator		145 Summons. No.		04
	62 Operator		146 Summons. No.		92 Operator		147 Summons. No.		04
	63 Operator		148 Summons. No.		93 Operator		149 Summons. No.		04
	64 Operator		150 Summons. No.		94 Operator		151 Summons. No.		04
	65 Operator		152 Summons. No.		95 Operator		153 Summons. No.		04
	66 Operator		154 Summons. No.		96 Operator		155 Summons. No.		04
	67 Operator		156 Summons. No.		97 Operator		157 Summons. No.		04
	68 Operator		158 Summons. No.		98 Operator		159 Summons. No.		04
	69 Operator		160 Summons. No.		99 Operator		161 Summons. No.		04
	70 Operator		162 Summons. No.		100 Operator		163 Summons. No.		04
	71 Operator		164 Summons. No.		101 Operator		165 Summons. No.		04
	72 Operator		166 Summons. No.		102 Operator		167 Summons. No.		04
	73 Operator		168 Summons. No.		103 Operator		169 Summons. No.		04
	74 Operator		170 Summons. No.		104 Operator		171 Summons. No.		04
	75 Operator		172 Summons. No.		105 Operator		173 Summons. No.		04
	76 Operator		174 Summons. No.		106 Operator		175 Summons. No.		04
	77 Operator		176 Summons. No.		107 Operator		177 Summons. No.		04
	78 Operator		178 Summons. No.		108 Operator		179 Summons. No.		04
	79 Operator		180 Summons. No.		109 Operator		181 Summons. No.		04
	80 Operator		182 Summons. No.		110 Operator		183 Summons. No.		04
	81 Operator		184 Summons. No.		111 Operator		185 Summons. No.		04
	82 Operator		186 Summons. No.		112 Operator		187 Summons. No.		04
	83 Operator		188 Summons. No.		113 Operator		189 Summons. No.		04
	84 Operator		190 Summons. No.		114 Operator		191 Summons. No.		04
	85 Operator		192 Summons. No.		115 Operator		193 Summons. No.		04
	86 Operator		194 Summons. No.		116 Operator		195 Summons. No.		04
	87 Operator		196 Summons. No.		117 Operator		197 Summons. No.		04
	88 Operator		198 Summons. No.		118 Operator		199 Summons. No.		04
	89 Operator		199 Summons. No.		119 Operator		200 Summons. No.		04
	90 Operator		200 Summons. No.		120 Operator		201 Summons. No.		04
	91 Operator		201 Summons. No.		121 Operator		202 Summons. No.		04
	92 Operator		202 Summons. No.		122 Operator		203 Summons. No.		04
	93 Operator		203 Summons. No.		123 Operator		204 Summons. No.		04
	94 Operator		204 Summons. No.		124 Operator		205 Summons. No.		04
	95 Operator		205 Summons. No.		125 Operator		206 Summons. No.		04
	96 Operator		206 Summons. No.		126 Operator		207 Summons. No.		04
	97 Operator		207 Summons. No.		127 Operator		208 Summons. No.		04
	98 Operator		208 Summons. No.		128 Operator		209 Summons. No.		04
	99 Operator		209 Summons. No.		129 Operator		210 Summons. No.		04
	100 Operator		210 Summons. No.		130 Operator		211 Summons. No.		04
	101 Operator		211 Summons. No.		131 Operator		212 Summons. No.		04
	102 Operator		212 Summons. No.		132 Operator		213 Summons. No.		04
	103 Operator		213 Summons. No.		133 Operator		214 Summons. No.		04
	104 Operator		214 Summons. No.		134 Operator		215 Summons. No.		04
	105 Operator		215 Summons. No.		135 Operator		216 Summons. No.		04
	106 Operator		216 Summons. No.		136 Operator		217 Summons. No.		04
	107 Operator		217 Summons. No.		137 Operator		218 Summons. No.		04
	108 Operator		218 Summons. No.		138 Operator		219 Summons. No.		04
	109 Operator		219 Summons. No.		139 Operator		220 Summons. No.		04
	110 Operator		220 Summons. No.		140 Operator		221 Summons. No.		04
	111 Operator		221 Summons. No.		141 Operator		222 Summons. No.		04
	112 Operator		222 Summons. No.		142 Operator		223 Summons. No.		04
	113 Operator		223 Summons. No.		143 Operator		224 Summons. No.		04
	114 Operator		224 Summons. No.		144 Operator		225 Summons. No.		04
	115 Operator		225 Summons. No.		145 Operator		226 Summons. No.		04
	116 Operator		226 Summons. No.		146 Operator		227 Summons. No.		04
	117 Operator		227 Summons. No.		147 Operator		228 Summons. No.		04
	118 Operator		228 Summons. No.		148 Operator		229 Summons. No.		04
	119 Operator		229 Summons. No.		149 Operator		230 Summons. No.		04
	120 Operator		230 Summons. No.		150 Operator		231 Summons. No.		04
	121 Operator		231 Summons. No.		151 Operator		232 Summons. No.		04
	122 Operator		232 Summons. No.		152 Operator		233 Summons. No.		04
	123 Operator		233 Summons. No.		153 Operator		234 Summons. No.		04
	124 Operator		234 Summons. No.		154 Operator		235 Summons. No.		04
	125 Operator		235 Summons. No.		155 Operator		236 Summons. No.		04
	126 Operator		236 Summons. No.		156 Operator		237 Summons. No.		04
	127 Operator		237 Summons. No.		157 Operator		238 Summons. No.		04
	128 Operator		238 Summons. No.		158 Operator		239 Summons. No.		04
	129 Operator		239 Summons. No.		159 Operator		240 Summons. No.		04
	130 Operator		240 Summons. No.		160 Operator		241 Summons. No.		04
	131 Operator		241 Summons. No.		161 Operator		242 Summons. No.		04
	132 Operator		242 Summons. No.		162 Operator		243 Summons. No.		04
	133 Operator		243 Summons. No.		163 Operator		244 Summons. No.		04
	134 Operator		244 Summons. No.		164 Operator		245 Summons. No.		04
	135 Operator		245 Summons. No.		165 Operator		246 Summons. No.		04
	136 Operator		246 Summons. No.		166 Operator		247 Summons. No.		04
	137 Operator		247 Summons. No.		167 Operator		248 Summons. No.		04
	138 Operator		248 Summons. No.		168 Operator		249 Summons. No.		04
	139 Operator		249 Summons. No.		169 Operator		250 Summons. No.		04
	140 Operator		250 Summons. No.		170 Operator		251 Summons. No.		04
	141 Operator		251 Summons. No.		171 Operator		252 Summons. No.		04
	142 Operator		252 Summons. No.		172 Operator		253 Summons. No.		04
	143 Operator		253 Summons. No.		173 Operator		254 Summons. No.		04
	144 Operator		254 Summons. No.		174 Operator		255 Summons. No.		04
	145 Operator		255 Summons. No.		175 Operator		256 Summons. No.		04
	146 Operator		256 Summons. No.		176 Operator		257 Summons. No.		04
	147 Operator		257 Summons. No.		177 Operator		258 Summons. No.		04
	148 Operator		258 Summons. No.		178 Operator		259 Summons. No.		04
	149 Operator		259 Summons. No.		179 Operator		260 Summons. No.		04
	150 Operator		260 Summons. No.		180 Operator		261 Summons. No.		04
	151 Operator		261 Summons. No.		181 Operator		262 Summons. No.		04
	152 Operator		262 Summons. No.		182 Operator		263 Summons. No.		04
	153 Operator		263 Summons. No.		183 Operator		264 Summons. No.		04
	154 Operator		264 Summons. No.		184 Operator		265 Summons. No.		04
	155 Operator		265 Summons. No.		185 Operator		266 Summons. No.		04
	156 Operator		266 Summons. No.		186 Operator		267 Summons. No.		04
	157 Operator		267 Summons. No.		187 Operator		268 Summons. No.		04
	158 Operator		268 Summons. No.		188 Operator		269 Summons. No.		04
	159 Operator		269 Summons. No.		189 Operator		270 Summons. No.		04
	160 Operator		270 Summons. No.		190 Operator		271 Summons. No.		04
	161 Operator		271 Summons. No.		191 Operator		272 Summons. No.		04
	162 Operator		272 Summons. No.		192 Operator		273 Summons. No.		04
	163 Operator		273 Summons. No.		193 Operator		274 Summons. No.		04
	164 Operator		274 Summons. No.		194 Operator		275 Summons. No.		04
	165 Operator		275 Summons. No.		195 Operator		276 Summons. No.		04
	166 Operator		276 Summons. No.		196 Operator		277 Summons. No.		04
	167 Operator		277 Summons. No.		197 Operator		278 Summons. No.		04
	168 Operator		278 Summons. No.		198 Operator		279 Summons. No.		04
	169 Operator		279 Summons. No.		199 Operator		280 Summons. No.		04
	170 Operator		280 Summons. No.		200 Operator		281 Summons. No.		04
	171 Operator		281 Summons. No.		201 Operator		282 Summons. No.		04
	172 Operator		282 Summons. No.		202 Operator		283 Summons. No.		04
	173 Operator		283 Summons. No.		203 Operator		284 Summons. No.		04
	174 Operator		284 Summons. No.		204 Operator		285 Summons. No.		04
	175 Operator		285 Summons. No.		205 Operator		286 Summons. No.		04
	176 Operator		286 Summons. No.		206 Operator		287 Summons. No.		04
	177 Operator		287 Summons. No.		207 Operator		288 Summons. No.		04
	178 Operator		288 Summons. No.		208 Operator		289 Summons. No.		04
	179 Operator		289 Summons. No.		209 Operator		290 Summons. No.		04
	180 Operator		290 Summons. No.		210 Operator		291 Summons. No.		04
	181 Operator		291 Summons. No.		211 Operator		292 Summons. No.		04
	182 Operator		292 Summons. No.		212 Operator		293 Summons. No.		04
	183 Operator		293 Summons. No.		213 Operator		294 Summons. No.		04
	184 Operator		294 Summons. No.		214 Operator		295 Summons. No.		04
	185 Operator		295 Summons. No.		215 Operator		296 Summons. No.		04
	186 Operator		296 Summons. No.		216 Operator		297 Summons. No.		04
	187 Operator		297 Summons. No.		217 Operator		298 Summons. No.		04
	188 Operator		298 Summons. No.		218 Operator		299 Summons. No.		04
	189 Operator		299 Summons. No.		219 Operator		300 Summons. No.		04
	190 Operator		300 Summons. No.		220 Operator		301 Summons. No.		04
	191 Operator		301 Summons. No.		221 Operator		302 Summons. No.		04
	192 Operator		302 Summons. No.		222 Operator		303 Summons. No.		04
	193 Operator		303 Summons. No.		223 Operator		304 Summons. No.		04
	194 Operator		304 Summons. No.		224 Operator		305 Summons. No.		04
	195 Operator		305 Summons. No.		225 Operator		306 Summons. No.		04
	196 Operator		306 Summons. No.		22				

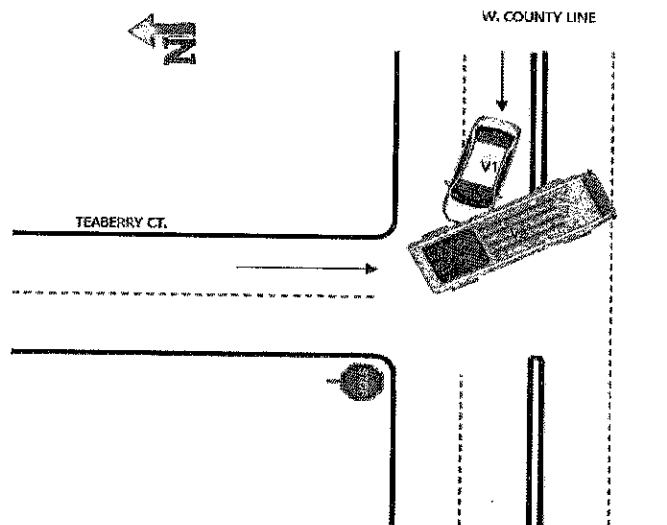
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-022058**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 1 STATED HE WAS IN THE LEFT LANE ON W. COUNTY LINE ROAD TRAVELING WEST WHEN VEHICLE 2 MADE A LEFT TURN IN FRONT OF VEHICLE 1.

DRIVER OF VEHICLE 2 STATED SHE WAS STOPPED AT A STOP SIGN ON TEABERRY COURT AT THE INTERSECTION WITH W. COUNTY LINE ROAD WAITING TO MAKE A LEFT TURN. ONCE SHE DETERMINED THE ROADWAY WAS CLEAR, SHE PROCEEDED TO MAKE A LEFT ONTO W. COUNTY LINE ROAD. AS SHE WAS TURNING, VEHICLE 1 "CAME SPEEDING UP THE HILL" AND STRUCK VEHICLE 2.

THIS INVESTIGATION DETERMINED THAT THE DRIVER OF VEHICLE 2 MADE A UNSAFE LEFT TURN AND SPEED WAS NOT A FACTOR.

146 Officer's Signature

SEUNATH K

147 Badge #

284

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending☒ Complete

STATE OF NEW JERSEY
MOTOR VEHICLE CRASH DESCRIPTIONPolice Agency **LAKEWOOD TOWNSHIP POLICE DEPT.**Station _____ Case No. **22-022058**

1.	<u>FAIGA</u>	<u>GOLDBERG</u>
2.	<u>ZLATA</u>	<u>MANNES</u>
3.	<u>MALKA</u>	<u>WESTREICH</u>
4.	<u>DEVORA</u>	<u>CITRONENBAUM</u>
5.	<u>SARAH</u>	<u>LEVIN</u>
6.	<u>ROCHEL</u>	<u>HERZKA</u>
7.	<u>ESTHER</u>	<u>SHALOM</u>
8.	<u>ESTY</u>	<u>GOLDBERG</u>
9.	<u>MIRIAM</u>	<u>GOLDBERG</u>
10.	<u>SHOSHANA</u>	<u>BARAN</u>
11.	<u>FAIGY</u>	<u>FUERST</u>
12.	<u>HADASSAH</u>	<u>JACOB</u>
13.	<u>NECHAMA</u>	<u>NEUMANN</u>
14.	<u>SHAINA</u>	<u>HAUPTMAN</u>
15.	<u>SARA</u>	<u>LEVEY</u>
16.	<u>LEAH</u>	<u>GARTENHAUS</u>
17.	<u>SHAINDY</u>	<u>ABRAHAMSON</u>
18.	<u>YEHUDIS</u>	<u>BURSZTYN</u>
19.	<u>BROCHA</u>	<u>ADLER</u>
20.	<u>RIVKA</u>	<u>NEWHOUSE</u>
21.	<u>CHAVA</u>	<u>GREENBERG</u>
22.	<u>CHASSIDA</u>	<u>EINHORN</u>
23.	<u>TEHILA</u>	<u>ABRAMSKY</u>
24.	<u>CHAYA</u>	<u>STERN</u>
25.	<u>RIVKA</u>	<u>ZUCKER</u>

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SCHOOL BUS
(full size)

● DRIVER			DOOR →	
1	2	3	4	5
6	7	8	9	10
11	12	13	14	15
16	17	18	19	20
21	22	23	24	25
26	27	28	29	30
31	32	33	34	35
36	37	38	39	40
41	42	43	44	45
46	47	48	49	50
51	52		53	54

MINIBUS

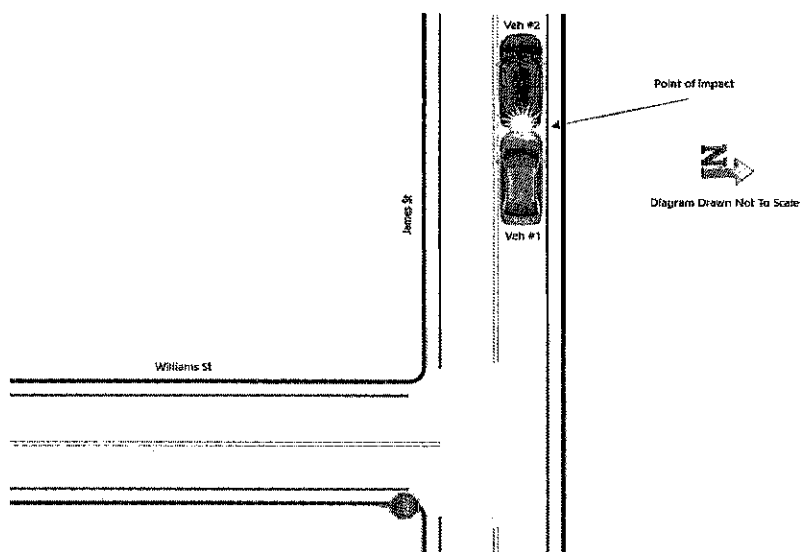
● DRIVER			DOOR →	
1	2		3	4
5	6		7	8
9	10		11	12
13	14		15	16

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-022192

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL IF INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Both drivers were traveling West on James Street in heavy traffic. Driver #2 said that she was stopped when she was struck from behind by driver #1.

Driver #1 said that he attempted to stop but was unable to in time and collided with vehicle #2. No reported injuries at this time. Driver #1 was found to be at fault for the crash.

Driver #2 was advised that her vehicle registration was expired and she parked it on private property where that were stopped.

146 Officer's Signature

MERRILL D

147 Badge #

323

148 Reviewer

MY

Badge #

329

149 Case Status

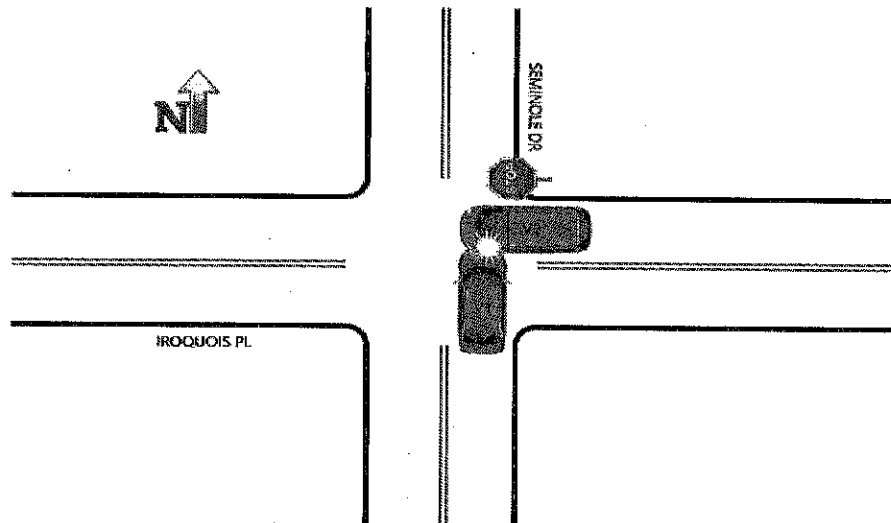
☐ Pending ☒ Complete

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-022196**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	
	2	08	01	-	7	F	-	-	-	05	05	-	-	ROIZY - OKOWITA 1 MACINTOSH CT JACKSON NJ 08527

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

VEHICLE 1 WAS TRAVELING NORTH ON SEMINOLE DR APPROACHING IROQUOIS PL. VEHICLE 2 WAS TRAVELING WEST ON IROQUOIS PL APPROACHING SEMINOLE DR.

DRIVER 1 STATED THAT VEHICLE 2 FAILED TO STOP AT THE STOP SIGN.

DRIVER 2 STATED THAT SHE DID NOT REALIZE THERE WAS A STOP SIGN.

IT APPEARS THAT DRIVER 2 FAILED TO OBEY THE STOP SIGN AND CAUSED THE CRASH. DRIVER 2 IS AT FAULT.

146 Officer's Signature

RIVERA M

147 Badge #

327

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending ☒ Complete

PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
05	1 Case Number 22-022478		10 Crash Occurred On: E KENNEDY BLVD		11 Speed Limit 25
01	2 Police Dept of LAKEWOOD TOWNSHIP F01		12 Route No. 13 Milepost		18 Speed Limit 25
01	3 Station/Precinct		14 15 16		19 20
07	4 Date of Crash 03/24/22		5 Day of Week THURSDAY		6 Time (use 2400 hrs) 1647
01a	7 Municipality Code 1514		8 Total Killed --		9 Total Injured --
100b	23 Veh # 1		24 Policy No. 939 927 083		25 NJ Ins. Code 054
04	26 Driver's First Name DAVID		27 Number & Street 185 RIDGE AVE		28 City LAKEWOOD
02	29 Sex M		30 Eyes 2		31 State NJ
02	32 Driver's License Number P06171560002762		33 DOB 02/07/1976		34 Expires 02 26
105	35 Owner's First Name DAVID		36 Number & Street 36 SAINT NICHOLAS AVE.		37 City LAKEWOOD
02	38 Make TOYT		39 Model COR		40 Color SIL
106	41 Year 2022		42 Plate No. L63PBX		43 State NJ
107	44 VIN JTDEPMAE7NJ204377		45 Expires 09 25		46 Vehicle Removed To
108	47 Authority Owner		48 Alcohol/Drug Test No		49 Hazardous Material None
01	50 Carrier No. None		51 GVWR/GCWR Weight <= 10,000 lbs		52 Motor Carrier or Government Entity
01	53 Veh # 2		54 Policy No. 4362-77-25-60		55 NJ Ins. Code 148
109	56 Driver's First Name DAVID		57 Number & Street 185 RIDGE AVE		58 City LAKEWOOD
110	59 Sex M		60 Eyes 2		61 State NJ
111	62 Driver's License Number P06171560002762		63 DOB 02/07/1976		64 Expires 02 26
112	65 Owner's First Name DAVID		66 Number & Street 185 RIDGE AVE		67 City LAKEWOOD
113	68 Make TOYT		69 Model SIE		70 Color 3
114	71 Year 2016		72 Plate No. D38MDU		73 State NJ
115	74 VIN 5TDKK3DC7GS744971		75 Expires 01 23		76 Vehicle Removed To
116	77 Authority Owner		78 Alcohol/Drug Test No		79 Hazardous Material None
117	80 Carrier No. None		81 GVWR/GCWR Weight <= 10,000 lbs		82 Motor Carrier or Government Entity
118a	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
118b	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
119a	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
119b	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
120a	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
120b	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
121a	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
121b	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
122	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
123	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
124	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
125	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
126a	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
126b	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
126c	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
126d	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
126e	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
127a	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants - If Deceased, Date & Time of Death		83 84 85 86 87 88 89 90 91 92 93 94 95
127b	83 84 85 86 87 88 89 90 91 92 93 94 95		Names & Addresses of Occupants -		

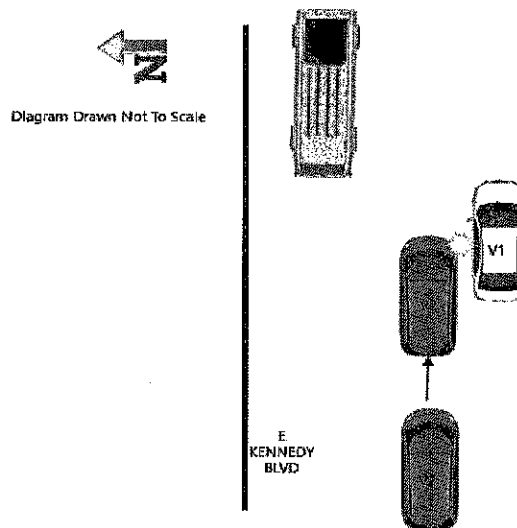
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-022478**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle #1 was parked on E Kennedy Blvd facing East and on the South side of the road. Vehicle #2 was travelling East on E Kennedy Blvd going straight ahead. As Vehicle #2 was passing Vehicle #1, the driver misjudged the amount of room it had and sideswiped Vehicle #1. Vehicle #1 sustained dents and scratches to the middle driver side of the vehicle. Vehicle #2 sustained scratches and cracks to the front passenger side fender. There were no reports of injuries.

Driver 2 stated he just made the turn onto E Kennedy Blvd. He observed a bus coming though in the opposite direction of travel. As Driver 2 was going straight, he thought he had enough room to pass Vehicle #1.

My investigation finds Vehicle #2 to be at fault for driver inattention.

146 Officer's Signature

MCAVOY M

147 Badge #

354

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

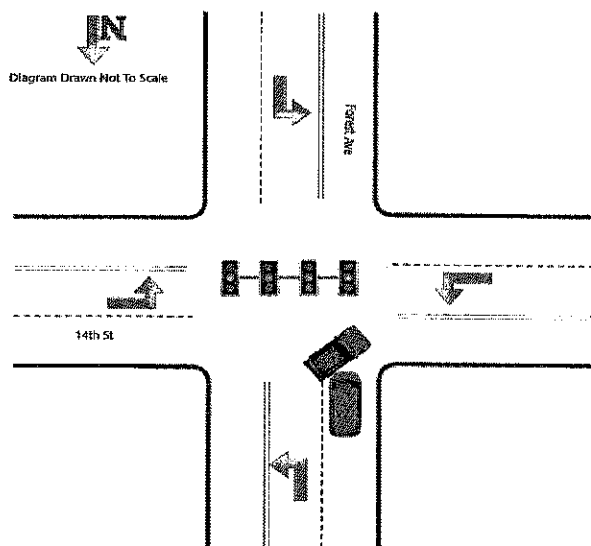
PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
05	1 Case Number 22-022515		10 Crash Occurred On: 14TH ST		11 Speed Limit 35
01	2 Police Dept of LAKEWOOD TOWNSHIP F01		12 Route No. 0014		13 Milepost -
03	3 Station/Precinct -		14 At Intersection With 15 Feet 16 Miles		17 Cross Road Name FOREST AVE
05	4 Date of Crash mm dd yy 03/24/22		5 Day Of Week THURSDAY		6 Time (use 2400 hrs) 1941
01	7 Municipality Code 1514		8 Total Killed --		9 Total Injured --
01	23 Veh # 1		24 Policy No. 4116152002		25 NJ Ins. Code 148
04	26 Driver's First Name DAVID		27 Number & Street 32 AROSA HILL		28 City LAKEWOOD
02	29 Sex M		30 Eyes 02		31 State NJ
02	32 Driver's License Number F71911560012732		33 DOB mm dd yyyy 12/17/1973		34 Expires mm yy 12 23
02	35 Owner's First Name PESSIE		36 Number & Street 32 AROSA HILL		37 City LAKEWOOD
01	38 Make TOYT		39 Model HIG		40 Color BLK
01	41 Year 2022		42 Plate No. G20PRS		43 State NJ
01	44 VIN STDFZRBH7NS189564		45 Expires 02 25		46 Vehicle Removed To PRIVATE TOW
01	47 Authority Owner		48 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0. % Pending		49 Hazardous Material None On Board Spill Hazard Class Placard No.
03	50 Carrier No. USDOT MC/MX		51 GVWR/GCWR Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs		52 Motor Carrier or Government Entity -
03	53 Veh # 2		54 Policy No. 4597799479		55 NJ Ins. Code 100
01	56 Driver's First Name JOSE		57 Number & Street 1422 PUTNAM AVE 2L		58 City BROOKLYN
01	59 Sex M		60 Eyes 02		61 State NY
01	62 Driver's License Number 594371222		63 DOB mm dd yyyy 03/20/1981		64 Expires mm yy 03 26
01	65 Owner's First Name ROSALINO		66 Number & Street 1450 BELLINGER ST		67 City LAKEWOOD
01	68 Make CHRY		69 Model TOW		70 Color RD
01	71 Year 2013		72 Plate No. E74GPG		73 State NJ
01	74 VIN 2C4RC1CG4DR748114		75 Expires 04 22		76 Vehicle Removed To -
01	77 Authority Owner		78 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0. % Pending		79 Hazardous Material None On Board Spill Hazard Class Placard No.
01	80 Carrier No. USDOT MC/MX		81 GVWR/GCWR Weight <= 10,000 lbs Weight 10,001-26,000 lbs Weight >= 26,001 lbs		82 Motor Carrier or Government Entity -
01	83 Damage To Other Property -		84 Yes (If Yes, describe) No		85
01	86 Charge -		87 Summons No. -		88
01	89 Charge -		90 Summons No. -		89
01	91 Charge -		92 Summons No. -		90
01	93 Charge -		94 Summons No. -		91
01	95 Charge -		96 Summons No. -		92
01	97 Charge -		98 Summons No. -		93
01	99 Charge -		100 Summons No. -		94
01	101 Charge -		102 Summons No. -		95
01	103 Charge -		104 Summons No. -		96
01	105 Charge -		106 Summons No. -		97
01	107 Charge -		108 Summons No. -		98
01	109 Charge -		110 Summons No. -		99
01	111 Charge -		112 Summons No. -		100
01	113 Charge -		114 Summons No. -		101
01	115 Charge -		116 Summons No. -		102
01	117 Charge -		118 Summons No. -		103
01	119 Charge -		120 Summons No. -		104
01	121 Charge -		122 Summons No. -		105
01	123 Charge -		124 Summons No. -		106
01	125 Charge -		126 Summons No. -		107
01	127 Charge -		128 Summons No. -		108
01	129 Charge -		130 Summons No. -		109
01	131 Charge -		132 Summons No. -		110
01	133 Charge -		134 Summons No. -		111
01	135 Charge -		136 Summons No. -		112
01	137 Charge -		138 Summons No. -		113
01	139 Charge -		140 Summons No. -		114
01	141 Charge -		142 Summons No. -		115
01	143 Charge -		144 Summons No. -		116
01	145 Charge -		146 Summons No. -		117
01	147 Charge -		148 Summons No. -		118
01	149 Charge -		150 Summons No. -		119
01	151 Charge -		152 Summons No. -		120
01	153 Charge -		154 Summons No. -		121
01	155 Charge -		156 Summons No. -		122
01	157 Charge -		158 Summons No. -		123
01	159 Charge -		160 Summons No. -		124
01	161 Charge -		162 Summons No. -		125
01	163 Charge -		164 Summons No. -		126
01	165 Charge -		166 Summons No. -		127
01	167 Charge -		168 Summons No. -		128
01	169 Charge -		170 Summons No. -		129
01	171 Charge -		172 Summons No. -		130
01	173 Charge -		174 Summons No. -		131
01	175 Charge -				

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-022515

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated he was in the inside lane on Forest Ave approaching the traffic light on 14th St headed southbound. He reported that he had his right turn signal activated and wanted to make a wide turn onto 14th St since his vehicle is a bigger SUV. He reported that as he was making his right hand turn, he was struck from the vehicle behind him (vehicle 2) who struck him on the rear passenger side.

Driver of vehicle 2 was travelling southbound on Forest Ave approaching the traffic light on 14th St. He reported that vehicle 1 was directly ahead of him and in the outside lane with no turn signal activated. He added that driver of vehicle 1 made a right hand turn from the left only turn lane which is what caused the accident.

After my investigation, I cannot determine who is at fault due to the conflicting stories from both driver of vehicle 1 and driver of vehicle 2. Vehicle 1 sustained disabling damage to the rear passenger side tire resulting Moishy's Towing to tow the vehicle. Vehicle 2 sustained disabling damage to the front of the vehicle resulting in the vehicle to be parked on the shoulder and out of the roadway while they make arrangements for the vehicle. There were no injuries reported at the scene of the crime.

146 Officer's Signature
AMOROSO, A147 Badge #
415148 Reviewer
JPBadge #
283149 Case Status
☐ Pending ☒ Complete

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																																																																																																																			
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-	Results: 0. - %										☐ Pending										Hazard Class		Placard No.		Results: 0. - %		☐ Pending										Hazard Class		Placard No.						132																																																																																									
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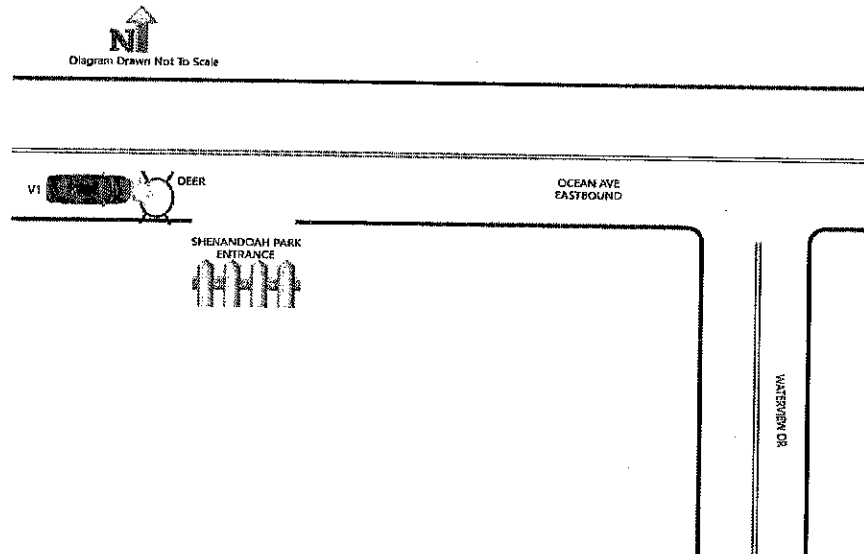
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**
 Station: **-** Case No: **22-022517**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL INVOLVED J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver 1 stated he was traveling Eastbound on Ocean Ave near the entrance of Shenandoah Park Entrance. He stated while traveling a Deer ran across the roadway (Southbound). Driver 1 stated he abruptly applied his brakes however he was unable to avoid collision. Driver 1 stated he collided into the Deer in the roadway.

Vehicle 1 sustained front end damage.

146 Officer's Signature

MCAVOY D

147 Badge #

372

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending☒ Complete

Form 104-1 (Rev. 12-13-10) New Jersey Police Crash Investigation Report

PAGE 1 OF 2 Fatal ☐ Reportable ☒ Non-Reportable ☐ Change Report ☐

1 Case Number 22-022518 10 Crash Occurred On: LINDEN AVE 11 Speed Limit: 35

2 Police Dept of LAKEWOOD TOWNSHIP F01 12 Route No. 13 Milepost 18 Speed Limit: 45

3 Station/Precinct 4 Date of Crash 03/24/22 5 Day Of Week THURSDAY 6 Time (use 2400 hrs) 2040 7 Municipality Code 1514 8 Total Killed 9 Total Injured 21 Latitude 40.09059 22 Longitude -74.19602

23 Veh # 1 24 Policy No. 93486772 25 NJ Ins. Code 134 53 Veh # 2 54 Policy No. 6010761872063 55 NJ Ins. Code 884

26 Driver's First Name Initial Last Name 27 Number & Street 28 City 29 Sex 56 Driver's First Name Initial Last Name 57 Number & Street 58 City 59 Sex

PAOLA A SUAREZLEON - F YITZCHOK U SZMIDT - M

407 BRICK BLVD 9 DEVASH COURT

BRICK NJ 08723 LAKEWOOD NJ 08701

30 Eyes 2 DL Class D Restrictions - Endorsements - 31 State NJ 60 Eyes 2 DL Class - Restrictions - Endorsements - 61 State NJ

32 Driver's License Number S90096166151902 33 DOB 01/17/1990 34 Expires 01/25 62 Driver's License Number S97577908411692 63 DOB 11/05/1969 64 Expires 11/25

35 Owner's First Name Initial Last Name 36 Number & Street 37 City 38 Make 39 Model 40 Color 41 Year 42 Plate No. 43 State 44 VIN 45 Expires 46 Vehicle Removed To 47 Authority 48 Alcohol/Drug Test 49 Hazardous Material 50 Carrier No. 51 GVWR/GCWR 52 Motor Carrier or Government Entity 53 VIN 54 Make 55 Model 56 Color 57 Year 58 Plate No. 59 State 60 VIN 61 Expires 62 Vehicle Removed To 63 Authority 64 Alcohol/Drug Test 65 Hazardous Material 66 Carrier No. 67 GVWR/GCWR 68 Motor Carrier or Government Entity 69 VIN 70 Make 71 Model 72 Color 73 Year 74 Plate No. 75 State 76 VIN 77 Expires 78 Vehicle Removed To 79 Authority 80 Alcohol/Drug Test 81 Hazardous Material 82 Carrier No. 83 GVWR/GCWR 84 Motor Carrier or Government Entity 85 VIN 86 Make 87 Model 88 Color 89 Year 90 Plate No. 91 State 92 VIN 93 Expires 94 Vehicle Removed To 95 Authority 96 Alcohol/Drug Test 97 Hazardous Material 98 Carrier No. 99 GVWR/GCWR 100 Motor Carrier or Government Entity 101 VIN 102 Make 103 Model 104 Color 105 Year 106 Plate No. 107 State 108 VIN 109 Expires 110 Vehicle Removed To 111 Authority 112 Alcohol/Drug Test 113 Hazardous Material 114 Carrier No. 115 GVWR/GCWR 116 Motor Carrier or Government Entity 117 VIN 118 Make 119 Model 120 Color 121 Year 122 Plate No. 123 State 124 VIN 125 Expires 126 Vehicle Removed To 127 Authority 128 Alcohol/Drug Test 129 Hazardous Material 130 Carrier No. 131 GVWR/GCWR 132 Motor Carrier or Government Entity 133 VIN 134 Make 135 Model 136 Color 137 Year 138 Plate No. 139 State 140 VIN 141 Expires 142 Vehicle Removed To 143 Authority 144 Alcohol/Drug Test 145 Hazardous Material 146 Carrier No. 147 GVWR/GCWR 148 Motor Carrier or Government Entity 149 VIN 150 Make 151 Model 152 Color 153 Year 154 Plate No. 155 State 156 VIN 157 Expires 158 Vehicle Removed To 159 Authority 160 Alcohol/Drug Test 161 Hazardous Material 162 Carrier No. 163 GVWR/GCWR 164 Motor Carrier or Government Entity 165 VIN 166 Make 167 Model 168 Color 169 Year 170 Plate No. 171 State 172 VIN 173 Expires 174 Vehicle Removed To 175 Authority 176 Alcohol/Drug Test 177 Hazardous Material 178 Carrier No. 179 GVWR/GCWR 180 Motor Carrier or Government Entity 181 VIN 182 Make 183 Model 184 Color 185 Year 186 Plate No. 187 State 188 VIN 189 Expires 190 Vehicle Removed To 191 Authority 192 Alcohol/Drug Test 193 Hazardous Material 194 Carrier No. 195 GVWR/GCWR 196 Motor Carrier or Government Entity 197 VIN 198 Make 199 Model 200 Color 201 Year 202 Plate No. 203 State 204 VIN 205 Expires 206 Vehicle Removed To 207 Authority 208 Alcohol/Drug Test 209 Hazardous Material 210 Carrier No. 211 GVWR/GCWR 212 Motor Carrier or Government Entity 213 VIN 214 Make 215 Model 216 Color 217 Year 218 Plate No. 219 State 220 VIN 221 Expires 222 Vehicle Removed To 223 Authority 224 Alcohol/Drug Test 225 Hazardous Material 226 Carrier No. 227 GVWR/GCWR 228 Motor Carrier or Government Entity 229 VIN 230 Make 231 Model 232 Color 233 Year 234 Plate No. 235 State 236 VIN 237 Expires 238 Vehicle Removed To 239 Authority 240 Alcohol/Drug Test 241 Hazardous Material 242 Carrier No. 243 GVWR/GCWR 244 Motor Carrier or Government Entity 245 VIN 246 Make 247 Model 248 Color 249 Year 250 Plate No. 251 State 252 VIN 253 Expires 254 Vehicle Removed To 255 Authority 256 Alcohol/Drug Test 257 Hazardous Material 258 Carrier No. 259 GVWR/GCWR 260 Motor Carrier or Government Entity 261 VIN 262 Make 263 Model 264 Color 265 Year 266 Plate No. 267 State 268 VIN 269 Expires 270 Vehicle Removed To 271 Authority 272 Alcohol/Drug Test 273 Hazardous Material 274 Carrier No. 275 GVWR/GCWR 276 Motor Carrier or Government Entity 277 VIN 278 Make 279 Model 280 Color 281 Year 282 Plate No. 283 State 284 VIN 285 Expires 286 Vehicle Removed To 287 Authority 288 Alcohol/Drug Test 289 Hazardous Material 290 Carrier No. 291 GVWR/GCWR 292 Motor Carrier or Government Entity 293 VIN 294 Make 295 Model 296 Color 297 Year 298 Plate No. 299 State 300 VIN 301 Expires 302 Vehicle Removed To 303 Authority 304 Alcohol/Drug Test 305 Hazardous Material 306 Carrier No. 307 GVWR/GCWR 308 Motor Carrier or Government Entity 309 VIN 310 Make 311 Model 312 Color 313 Year 314 Plate No. 315 State 316 VIN 317 Expires 318 Vehicle Removed To 319 Authority 320 Alcohol/Drug Test 321 Hazardous Material 322 Carrier No. 323 GVWR/GCWR 324 Motor Carrier or Government Entity 325 VIN 326 Make 327 Model 328 Color 329 Year 330 Plate No. 331 State 332 VIN 333 Expires 334 Vehicle Removed To 335 Authority 336 Alcohol/Drug Test 337 Hazardous Material 338 Carrier No. 339 GVWR/GCWR 340 Motor Carrier or Government Entity 341 VIN 342 Make 343 Model 344 Color 345 Year 346 Plate No. 347 State 348 VIN 349 Expires 350 Vehicle Removed To 351 Authority 352 Alcohol/Drug Test 353 Hazardous Material 354 Carrier No. 355 GVWR/GCWR 356 Motor Carrier or Government Entity 357 VIN 358 Make 359 Model 360 Color 361 Year 362 Plate No. 363 State 364 VIN 365 Expires 366 Vehicle Removed To 367 Authority 368 Alcohol/Drug Test 369 Hazardous Material 370 Carrier No. 371 GVWR/GCWR 372 Motor Carrier or Government Entity 373 VIN 374 Make 375 Model 376 Color 377 Year 378 Plate No. 379 State 380 VIN 381 Expires 382 Vehicle Removed To 383 Authority 384 Alcohol/Drug Test 385 Hazardous Material 386 Carrier No. 387 GVWR/GCWR 388 Motor Carrier or Government Entity 389 VIN 390 Make 391 Model 392 Color 393 Year 394 Plate No. 395 State 396 VIN 397 Expires 398 Vehicle Removed To 399 Authority 400 Alcohol/Drug Test 401 Hazardous Material 402 Carrier No. 403 GVWR/GCWR 404 Motor Carrier or Government Entity 405 VIN 406 Make 407 Model 408 Color 409 Year 410 Plate No. 411 State 412 VIN 413 Expires 414 Vehicle Removed To 415 Authority 416 Alcohol/Drug Test 417 Hazardous Material 418 Carrier No. 419 GVWR/GCWR 420 Motor Carrier or Government Entity 421 VIN 422 Make 423 Model 424 Color 425 Year 426 Plate No. 427 State 428 VIN 429 Expires 430 Vehicle Removed To 431 Authority 432 Alcohol/Drug Test 433 Hazardous Material 434 Carrier No. 435 GVWR/GCWR 436 Motor Carrier or Government Entity 437 VIN 438 Make 439 Model 440 Color 441 Year 442 Plate No. 443 State 444 VIN 445 Expires 446 Vehicle Removed To 447 Authority 448 Alcohol/Drug Test 449 Hazardous Material 450 Carrier No. 451 GVWR/GCWR 452 Motor Carrier or Government Entity 453 VIN 454 Make 455 Model 456 Color 457 Year 458 Plate No. 459 State 460 VIN 461 Expires 462 Vehicle Removed To 463 Authority 464 Alcohol/Drug Test 465 Hazardous Material 466 Carrier No. 467 GVWR/GCWR 468 Motor Carrier or Government Entity 469 VIN 470 Make 471 Model 472 Color 473 Year 474 Plate No. 475 State 476 VIN 477 Expires 478 Vehicle Removed To 479 Authority 480 Alcohol/Drug Test 481 Hazardous Material 482 Carrier No. 483 GVWR/GCWR 484 Motor Carrier or Government Entity 485 VIN 486 Make 487 Model 488 Color 489 Year 490 Plate No. 491 State 492 VIN 493 Expires 494 Vehicle Removed To 495 Authority 496 Alcohol/Drug Test 497 Hazardous Material 498 Carrier No. 499 GVWR/GCWR 500 Motor Carrier or Government Entity 501 VIN 502 Make 503 Model 504 Color 505 Year 506 Plate No. 507 State 508 VIN 509 Expires 510 Vehicle Removed To 511 Authority 512 Alcohol/Drug Test 513 Hazardous Material 514 Carrier No. 515 GVWR/GCWR 516 Motor Carrier or Government Entity 517 VIN 518 Make 519 Model 520 Color 521 Year 522 Plate No. 523 State 524 VIN 525 Expires 526 Vehicle Removed To 527 Authority 528 Alcohol/Drug Test 529 Hazardous Material 530 Carrier No. 531 GVWR/GCWR 532 Motor Carrier or Government Entity 533 VIN 534 Make 535 Model 536 Color 537 Year 538 Plate No. 539 State 540 VIN 541 Expires 542 Vehicle Removed To 543 Authority 544 Alcohol/Drug Test 545 Hazardous Material 546 Carrier No. 547 GVWR/GCWR 548 Motor Carrier or Government Entity 549 VIN 550 Make 551 Model 552 Color 553 Year 554 Plate No. 555 State 556 VIN 557 Expires 558 Vehicle Removed To 559 Authority 560 Alcohol/Drug Test 561 Hazardous Material 562 Carrier No. 563 GVWR/GCWR 564 Motor Carrier or Government Entity 565 VIN 566 Make 567 Model 568 Color 569 Year 570 Plate No. 571 State 572 VIN 573 Expires 574 Vehicle Removed To 575 Authority 576 Alcohol/Drug Test 577 Hazardous Material 578 Carrier No. 579 GVWR/GCWR 580 Motor Carrier or Government Entity 581 VIN 582 Make 583 Model 584 Color 585 Year 586 Plate No. 587 State 588 VIN 589 Expires 590 Vehicle Removed To 591 Authority 592 Alcohol/Drug Test 593 Hazardous Material 594 Carrier No. 595 GVWR/GCWR 596 Motor Carrier or Government Entity 597 VIN 598 Make 599 Model 600 Color 601 Year 602 Plate No. 603 State 604 VIN 605 Expires 606 Vehicle Removed To 607

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-022518

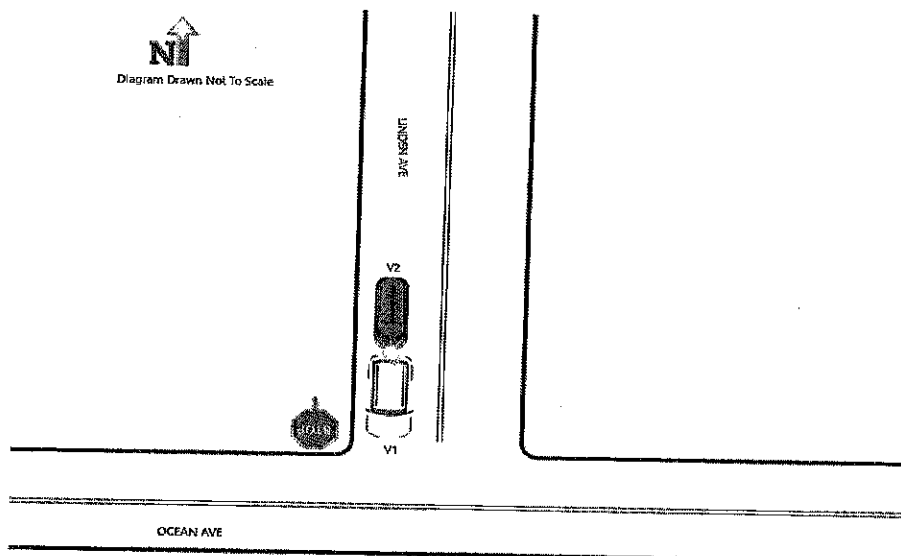
(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death

144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not To Scale



145 Crash Description/Narrative

Driver 1 stated she was stopped at a Stop Sign facing Southbound on Linden Ave. She stated she was awaiting to negotiate a Left Turn on Ocean Ave (Eastbound). Driver 1 stated while stopped at the Stop Sign Vehicle 2 collided into the rear of her Vehicle.

Driver 2 stated he was stopped behind Vehicle 1 facing Southbound on Linden Ave. He stated he believed Vehicle 1 began to proceed through the intersection. Driver 2 stated he took his foot off the brake and his Vehicle began to roll. He stated his Vehicle rolled into the rear of Vehicle 1.

I determined Crash was caused by Vehicle 2 for Following too Closely.

146 Officer's Signature

MCAVOY D

147 Badge #

372

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

96	PAGE	1	OF	2	☐ Fatal	New Jersey Police Crash Investigation Report										☒ Reportable	☐ Non-Reportable	☐ Change Report																																																																								
05	1 Case Number	22-020503										10 Crash Occurred On:	NEW HAMPSHIRE AVE										11 Speed Limit	35	0623	118a																																																																
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05	4 Date of Crash	mm		dd		yy		5 Day Of Week	WEDNESDAY										6 Time (use 2400 hrs)	1917		7 Municipality Code	1514		8 Total Killed	--		9 Total Injured	--		21 Latitude	40.085580		22 Longitude	-74.176920		119b																																																					
01	23 Veh #	1										24 Policy No.	4439764665										25 NJ Ins. Code	100		53 Veh #	2										54 Policy No.											55 NJ Ins. Code			01																																							
04	☐ Parked	☐ Ped	☐ Pedalcyclist	☐ Resp To Emergency	☐ Hit & Run											☐ Parked	☐ Ped	☐ Pedalcyclist	☐ Resp To Emergency	☒ Hit & Run																					120a																																																	
02	26 Driver's First Name	Initial										Last Name										29 Sex	F		56 Driver's First Name	Initial										Last Name										59 Sex			120b																																									
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01	35 Owner's First Name	Initial										Last Name										65 Owner's First Name	Initial										Last Name										123																																															
01	☐ Same As Driver	LAToya										A		ROWE-MCKELIVE				☐ Same As Driver																					124																																																			
01	36 Number & Street	184 HANOVER STREET										37 City	BRIDGEPORT										State	CT		Zip	06604		66 Number & Street											67 City											State			Zip			04																																	
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01	47 Authority	☒ Owner										☐ Driver	☐ Police											78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused																				79 Hazardous Material	☒ None ☐ On Board ☐ Spill																				126c																								
01	48 Alcohol/Drug Test	Type: ☐ Breath ☐ Blood ☐ Urine										Results: 0. - % ☐ Pending										49 Hazardous Material	☒ None ☐ On Board ☐ Spill																				80 Carrier No.	☐ USDOT										☐ MC/MX	☒ None											81 GVWR/GCWR	☒ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs	☐ Weight >= 26,001 lbs											126d	
01	50 Carrier No.	☐ USDOT										☐ MC/MX	☒ None											51 GVWR/GCWR	☒ Weight <= 10,000 lbs										☐ Weight 10,001-26,000 lbs	☐ Weight >= 26,001 lbs											82 Motor Carrier or Government Entity											126e																																
01	52 Motor Carrier or Government Entity											Number & Street											City			State			Zip			82 Motor Carrier or Government Entity											Number & Street											City			State			Zip			127a																											
01	135 Damage To Other Property	☐ Yes (If Yes, describe)										☒ No											136 Charge	1										137 Summons. No.	N/A										138 Charge	2										139 Summons. No.	N/A										127b																							
01	140 Charge											141 Summons. No.											142 Charge											143 Summons. No.											127c																																													
01	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death										127d																																																																		
A	1	01	01	05	31	F	-	-	-	11	04	-	-	LAToya A ROWE-MCKELIVE										-	127e																																																																	
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C	1	04	01	05	19	M	-	-	-	04	04	-	-	ROMARO WEBER										-	129																																																																	
D	2	01	01	-	-	-	00	00	00	00	00	-	-	11 PINEHURST DR; 5A LAKEWOOD NJ 08701										-	130																																																																	
														DENARIO ALLEN										-	131																																																																	
														87 FAIRWAY CT LAKEWOOD NJ 08701										-	132																																																																	
																								-	133																																																																	
																								-	134																																																																	
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New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-020503

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
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V														
O														
L														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)

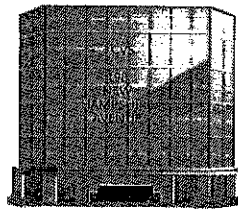
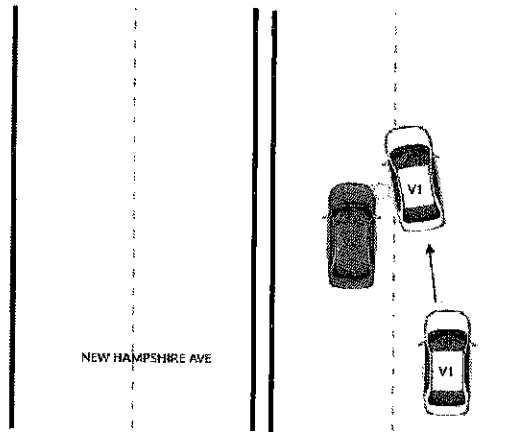


Diagram Drawn Not To Scale



145 Crash Description/Narrative

Vehicle #1 was travelling North on New Hampshire Avenue toward CVS (198 New Hampshire Avenue. Vehicle #1 was attempting to change lanes in Vehicle #2 lane of travel resulting in the crash. Vehicle #2 did not stay on scene and left without providing a statement to the police. Vehicle #1 sustained scratches to the middle driver side of the vehicle. There were no reports of injuries.

Driver 1 stated she was travelling North on New Hampshire Avenue toward CVS. As she was changing lanes, the two vehicles crashed and Vehicle #2 did not stay on scene. She advised me she believes the driver of Vehicle #2 was an approximately 35 year old female (unknown further description). The vehicle she was driving was a Black Honda (unknown model) and stated that she should have damage to the passenger side but did not know the extent of damage.

Judging from Driver 1 statement, my investigation would find Vehicle #1 at fault for unsafe lane change.

146 Officer's Signature

MCAVOY M

147 Badge #

354

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending☒ Complete

96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report		
05	1 Case Number		10 Crash Occurred On: HOPE CHAPEL RD		11 Speed Limit 45		09
01	22-020723				0639		118a
01	2 Police Dept of		At Intersection With Road Name		12 Route No. 13 Milepost		118b
01	LAKEWOOD TOWNSHIP 01		☐ Feet ☒ N ☐ E of: HOPE HILL LN		18 Speed Limit 25		119a
05	3 Station/Precinct		☐ Miles ☐ S ☐ W		☐ NB ☐ EB		25
05	4 Date of Crash		5 Day Of Week		19 Ramp		119b
01	03/17/22		THURSDAY		20 Route/Name		120a
01	6 Time (use 2400 hrs)		7 Municipality Code		21 Latitude		120b
01	1451		1514		40.09901		01
01	8 Total Killed		9 Total Injured		22 Longitude		121a
01	1		1		-74.25441		121b
04	23 Veh #		24 Policy No.		53 Veh #		122
01	1		1304980F0330B		2		01
02	26 Driver's First Name		29 Sex		54 Policy No.		123
02	JOSE		M		A0J2315478634017		07
02	27 Number & Street		56 Driver's First Name		55 NJ Ins. Code		124
02	106 SUSQUEHANNA STREET		OSCAR		370		125
02	28 City		57 Number & Street		59 Sex		126a
02	TOMS RIVER		159 COVENTRY DR		M		126b
02	30 Eyes		58 City				126c
02	2		LAKEWOOD				126d
02	DL Class		NJ 08755		NJ 08701		126e
02	Restrictions		State		Zip		26
02	D		NJ		NJ		127a
01	32 Driver's License Number		60 Eyes		61 State		127b
01	T76554106606932		2		NJ		127c
01	33 DOB		62 Driver's License Number		63 DOB		127d
01	06/04/1993		M05946090007022		07/08/2002		127e
01	34 Expires		64 Expires		65 Owner's First Name		128
01	06		25		07		129
01	35 Owner's First Name		65 Owner's First Name		Initial Last Name		130
01	DORA		SAUL		MARINGALINDO		131
01	36 Number & Street		66 Number & Street				132
01	106 SUSQUEHANNA ST		1312 PARIS CT				133
01	37 City		67 City				134
01	TOMS RIVER		LAKEWOOD				03
01	38 Make		68 Make				
01	JEEP		ACUR				
01	39 Model		69 Model				
01	WRA		MDX				
01	40 Color		70 Color				
01	BLK		BLU				
01	41 Year		71 Year				
01	2018		2005				
01	42 Plate No.		72 Plate No.				
01	M80NWK		W87PAZ				
01	43 State		73 State				
01	NJ		NJ				
01	44 VIN		74 VIN				
01	1C4BJWDG4JL898277		2HNYD18995H524440				
01	45 Expires		75 Expires				
01	06		22				
01	46 Vehicle Removed To		76 Vehicle Removed To				
01	☐ Driven		☒ Driven				
01	☐ Towed Disabled		☐ Towed Disabled				
01	☐ Towed Disabled & Impounded		☐ Towed Disabled & Impounded				
01	☒ Left At Scene		☐ Left At Scene				
01	☐ Towed Impounded		☐ Towed Impounded				
01	47 Authority		77 Authority				
01	☐ Owner		☒ Driver				
01	☐ Police		☐ Police				
01	48 Alcohol/Drug Test		78 Alcohol/Drug Test				
01	Given: ☒ No ☐ Yes ☐ Refused		Given: ☒ No ☐ Yes ☐ Refused				
01	Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine				
01	Results: 0. - % ☐ Pending		Results: 0. - % ☐ Pending				
01	49 Hazardous Material		79 Hazardous Material				
01	☒ None ☐ On Board ☐ Spill		☒ None ☐ On Board ☐ Spill				
01	50 Carrier No.		80 Carrier No.				
01	☐ USDOT ☐ None		☐ USDOT ☐ None				
01	☐ MC/MX ☐ None		☐ MC/MX ☐ None				
01	51 GVWR/GCWR		81 GVWR/GCWR				
01	☐ Weight <= 10,000 lbs		☐ Weight <= 10,000 lbs				
01	☐ Weight 10,001-26,000 lbs		☐ Weight 10,001-26,000 lbs				
01	☐ Weight >= 26,001 lbs		☐ Weight >= 26,001 lbs				
01	52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity				
01	Number & Street		Number & Street				
01	City		City				
01	State		State				
01	Zip		Zip				
01	135 Damage To Other Property		☐ Yes (If Yes, describe) ☒ No				
01	Oper. 136 Charge		137 Summons. No.		Oper. 138 Charge		
01	140 Charge		141 Summons. No.		139 Summons. No.		
01	142 Charge		143 Summons. No.				
01	83		84		85		
01	86		87		88		
01	89		90		91		
01	92		93		94		
01	95		Names & Addresses of Occupants - If Deceased, Date & Time of Death				
01	JOSE		F		TRUILLOCACERES		
01	106 SUSQUEHANNA STREET		TOMS RIVER		NJ 08755		
01	OSCAR		-		MARIN		
01	159 COVENTRY DR		LAKEWOOD		NJ 08701		
01	EUFROCINA		-		RAMIREZ-LEANDRO		
01	159 COVENTRY DR		LAKEWOOD		NJ 08701		

New Jersey Police Crash Investigation Report

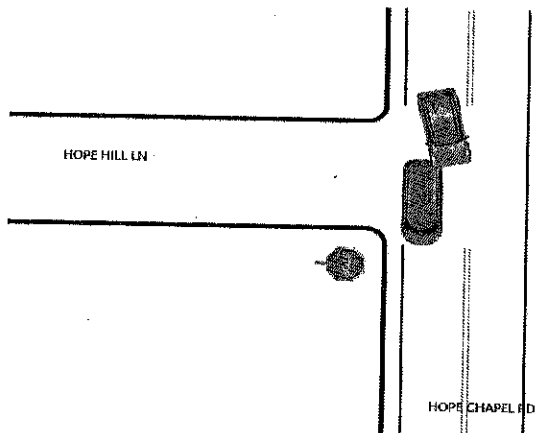
Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-020723**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death

144 Crash Diagram (NOT TO SCALE)

IN
Diagram Drawn Not To Scale



145 Crash Description/Narrative

The driver of vehicle #2 reported that he was traveling North on Hope Chapel Rd. when a vehicle in front of him stopped suddenly. He was able to stop his vehicle before making contact with this vehicle but was struck in the rear by vehicle #1.

The driver of vehicle #1 reported that he was traveling North on Hope Chapel Rd. when vehicle #2 stopped suddenly in front of him. He attempted to avoid the crash by turning to the left but was unable to stop before striking vehicle #2.

The drivers of vehicle #1 and #2 did not report any injuries at the scene of the crash. The passenger of vehicle #2 complained of pain in her lower back but did not want any medical attention.

Vehicle #1 sustained damage to the front passenger side of the bumper, fender, and sustained a flat front passenger tire. It was moved to the side of the roadway awaiting a private tow. Vehicle #2 sustained damage to the driver side rear bumper, tail light, and quarter panel. It was driven from the scene.

146 Officer's Signature
KOWALESKI S147 Badge #
319148 Reviewer
E. MIICKBadge #
307149 Case Status
☐ Pending ☒ Complete

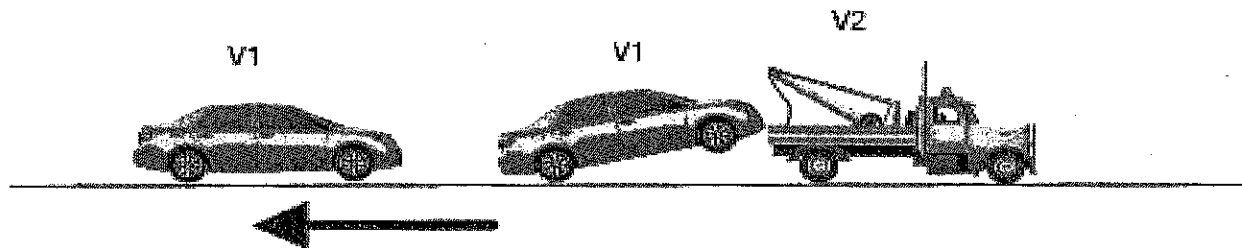
96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report			
97	1 Case Number		10 Crash Occurred On: 476 PROSPECT ST		11 Speed Limit		118a	
98	2 Police Dept of		Code		12 Route No. Suffix 13 Milepost 18 Speed Limit		118b	
99	3 Station/Precinct		4 Date of Crash		5 Day Of Week		119a	
100a	mm dd yy		mm dd yy		mm dd yy		119b	
100b	03/19/22		SATURDAY		1423		120a	
101	23 Veh #		24 Policy No.		25 NJ Ins. Code		120b	
102	1		AAA1075-01		55 NJ Ins. Code		121a	
103	26 Driver's First Name		Initial Last Name		29 Sex		121b	
104	EFREN		ALONSO		M		122	
105	27 Number & Street		57 Number & Street		59 Sex		123	
106	614 WESTON DR		TOMS RIVER		NJ 08755		124	
107	28 City		State Zip		61 State		125	
108	30 Eyes		DL Class		Restrictions		126a	
109	2		-		-		126b	
110	32 Driver's License Number		33 DOB		34 Expires		126c	
111	mm dd yyyy		mm dd yyyy		mm dd yyyy		126d	
112	A55321960011922		11/03/1992		11 22		127a	
113	35 Owner's First Name		Initial Last Name		65 Owner's First Name		127b	
114	DIGNA		FLORES		FREEDOM TOWING -		127c	
115	36 Number & Street		66 Number & Street		75 Expires		127d	
116	472 PROSPECT ST APT 1		1725 ROUTE 9 UNIT 1		08 22		128	
117	37 City		State Zip		77 Authority		129	
118	LAKEWOOD		NJ 08701		TOMS RIVER		130	
119	38 Make		39 Model		40 Color		131	
120	05 MERZ		ML3 - ML		SIL 2000		132	
121	44 VIN		45 Expires		74 VIN		133	
122	01 4JGAB54E2YA198356		04 23		1FDXF46P67EA55909		134	
123	46 Vehicle Removed To		76 Vehicle Removed To		81 GVWR/GCWR		135	
124	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded		Weight <= 10,000 lbs		136	
125	☐ Left At Scene ☐ Towed Impounded		☐ Left At Scene ☐ Towed Impounded		Weight 10,001-26,000 lbs		137	
126	47 Authority		77 Authority		Weight >= 26,001 lbs		138	
127	☐ Owner ☒ Driver ☐ Police		☐ Owner ☒ Driver ☐ Police		82 Motor Carrier or Government Entity		139	
128	48 Alcohol/Drug Test		78 Alcohol/Drug Test		FREEDOM TOWING & RECOVERY LLC		140	
129	Given: ☒ No ☐ Yes ☐ Refused		Given: ☒ No ☐ Yes ☐ Refused		Number & Street		141	
130	Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine		1725 ROUT 9 UNIT 1		142	
131	Results: 0. - % ☐ Pending		Results: 0. - % ☐ Pending		City		143	
132	50 Carrier No.		80 Carrier No.		State Zip		144	
133	☐ USDOT ☒ None		☒ USDOT 2836523 ☐ None		TOMS RIVER NJ 08755		145	
134	☐ MC/MX		☐ MC/MX		135 Damage To Other Property		146	
135	52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity		☐ Yes (If Yes, describe) ☒ No		147	
136	Number & Street		82 Motor Carrier or Government Entity				148	
137	1725 ROUT 9 UNIT 1		FREEDOM TOWING & RECOVERY LLC				149	
138	City		City				150	
139	TOMS RIVER		TOMS RIVER				151	
140	State Zip		State Zip				152	
141	NJ 08755		NJ 08755				153	
142	136 Charge		137 Summons No.				154	
143	01		PENDING				155	
144	140 Charge		141 Summons No.				156	
145			142 Charge				157	
146			143 Summons No.				158	
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367								

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-021218**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
E														
I														
N														
V														
O														
L														
V														
E														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

INSURANCE INFORMATION FOR FREEDOM TOWING: UNITED WISCONSIN INSURANCE COMPANY #29157

Arrived on location to find Vehicle 02 waiting at the intersection of Massachusetts Avenue and Prospect Street. I was informed that Vehicle 01 had fled the scene. I was further advised that the scene was on the property of the apartment complex. No injuries were reported on location.

Driver 01 stated that his company is contracted to tow for the complex and was requested by the complex management to remove vehicles located on the grass. While connected to Vehicle 01, a Hispanic male entered the vehicle, placed it in reverse and was able to remove the vehicle from the tow truck. Vehicle 01 then sped from the scene.

Upon identifying Vehicle 01, contact was unable to be made with the registered owner and the vehicle was not able to be located.

Witness video uploaded to Spillman.

No visible damage was noted on Vehicle 02. JMS/324

146 Officer's Signature

SANDSTROM J

147 Badge #

324

148 Reviewer

PA

Badge #

325

149 Case Status

☒ Pending ☐ Complete

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-021593**

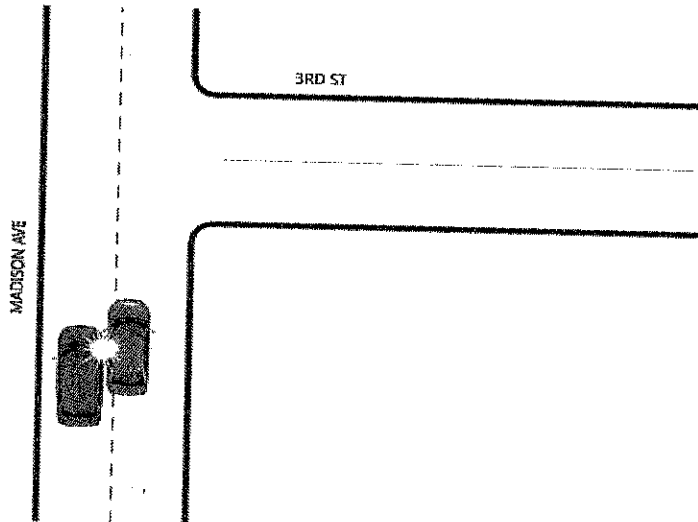
(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
83	84	85	86	87	88	89	90	91	92	93	94	95		Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
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144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not To Scale



145 Crash Description/Narrative

Driver of V1 stated she was heading northbound on Madison Ave. Driver of V1 stated as she was approaching 3rd St she noticed V2 was trying to merge into her lane but failed to see V1. V2 then side swiped into the right side of V1 front bumper causing minor damage and turned into 3rd St heading east.

Driver of V1 stated she took a picture and showed a Gray Kia with Nj Registration V17 MXK. The registered owner of V2 showed a Samuel Kein out of 217 Squankum Rd, Lakewood Nj. I attempted to make contact with the registered owner but was met with a tenant who stated Samuel wasn't home. A yellow Card was provided and I advised that as soon as he gets in contact with the owner to please contact Lakewood Police.

End report

146 Officer's Signature

RODRIGUEZ, B

147 Badge #

424

148 Reviewer

SGT. J. SPAGNUOLO

Badge #

331

149 Case Status

☒ Pending
 ☐ Complete

96	PAGE <u>1</u> OF <u>2</u> ☐ Fatal		New Jersey Police Crash Investigation Report										☒ Reportable ☐ Non-Reportable ☐ Change Report																																																																					
05	1 Case Number 22-022206										10 Crash Occurred On: 1105 E COUNTY LINE RD										11 Speed Limit 10		118a	25																																																										
01	2 Police Dept of LAKEWOOD TOWNSHIP F01										☐ At Intersection With Road Name Dir										12 Route No. Suffix 13 Milepost		118b																																																											
01	3 Station/Precinct										☐ Feet ☐ N ☐ E of: ☐ S ☐ W										18 Speed Limit		119a																																																											
09	4 Date of Crash 03/15/22										5 Day Of Week TUESDAY										6 Time (use 2400 hrs) 1255										7 Municipality Code 1514										8 Total Killed --										9 Total Injured --										21 Latitude 40.10555										22 Longitude -74.18566										119b	
04	23 Veh # 1										24 Policy No. SEE NARRATIVE										25 NJ Ins. Code										53 Veh # 2										54 Policy No.										55 NJ Ins. Code										120a																					
02	☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run										☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☒ Hit & Run										59 Sex										120b																																																			
01	26 Driver's First Name Initial Last Name										29 Sex										56 Driver's First Name Initial Last Name										59 Sex										121a	00																																								
01	27 Number & Street										57 Number & Street																				121b	00																																																		
01	28 City State Zip										58 City State Zip																				122	10																																																		
02	30 Eyes DL Class Restrictions Endorsements 31 State										60 Eyes DL Class Restrictions Endorsements 61 State																				123	13																																																		
06	32 Driver's License Number										33 DOB mm dd yyyy										34 Expires mm yy										62 Driver's License Number										63 DOB mm dd yyyy										64 Expires mm yy										124																					
01	35 Owner's First Name Initial Last Name										65 Owner's First Name Initial Last Name																				125																																																			
01	☐ Same As Driver BENJAMIN S WEBER										☐ Same As Driver																				126a	26																																																		
01	36 Number & Street 31 ENGLEBERG TER										66 Number & Street																				126b																																																			
01	37 City State Zip LAKEWOOD NJ 08701										67 City State Zip																				126c																																																			
03	38 Make CHEV										39 Model BOLT										40 Color GRY										41 Year 2021										42 Plate No. K81NZG										43 State NJ										127a	28																				
01	44 VIN 1G1FZ6S04M4112100										45 Expires 07 24										74 VIN										75 Expires										127b																																									
02	46 Vehicle Removed To										76 Vehicle Removed To																				127c																																																			
01	☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded										☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded																				127d																																																			
01	☒ Left At Scene ☐ Towed Impounded										☐ Left At Scene ☐ Towed Impounded																				127e	26																																																		
01	47 Authority ☐ Owner ☐ Driver ☐ Police										77 Authority ☐ Owner ☒ Driver ☐ Police																				128	06																																																		
01	48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending										49 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class Placard No.										78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending										79 Hazardous Material ☒ None ☐ On Board ☐ Spill Hazard Class Placard No.										129	06																																								
01	50 Carrier No. ☐ USDOT ☒ None										51 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No. ☐ USDOT ☒ None										81 GVWR/GCWR ☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										130	06																																								
01	52 Motor Carrier or Government Entity										82 Motor Carrier or Government Entity																				131	06																																																		
01	Number & Street										Number & Street																				132	06																																																		
01	City State Zip										City State Zip																				133	02																																																		
01	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No																														134	00																																																		
01	Oper. 136 Charge										137 Summons. No.										Oper. 138 Charge										139 Summons. No.										135	06																																								
01	Oper. 140 Charge										141 Summons. No.										Oper. 142 Charge										143 Summons. No.										136	02																																								
01	83 84 85 86 87 88 89 90 91 92 93 94 95										Names & Addresses of Occupants - If Deceased, Date & Time of Death																				137	00																																																		
A	02 01 01 05 U U 00 00 00 00 00										UNKNOWN																				138																																																			
B																															139																																																			
C																															140																																																			
D																															141																																																			

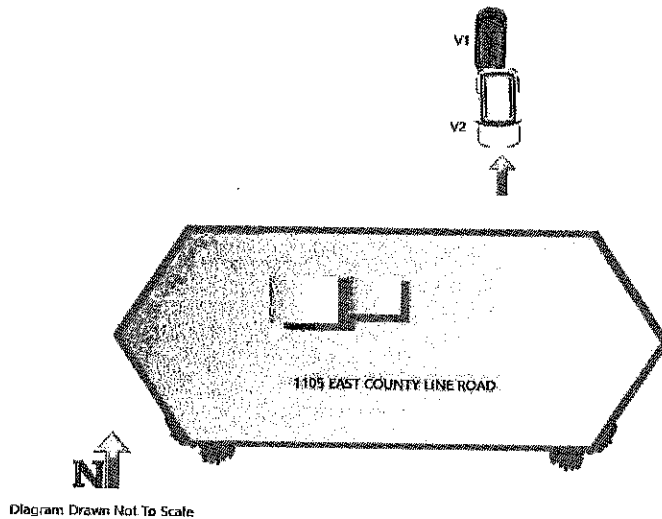
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-022206**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
L														
L														
E														
F														
I														
N														
V														
O														
L														
V														
E														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle 1, a 2021 Chevrolet Bolt, NJ K81-NZG was parked unoccupied in a marked parking space in the northern parking lot area of 1105 East County Line Road unoccupied. The owner of vehicle 1, Benjamin Weber stated he parked his vehicle in the parking lot due to it being a delivery vehicle for his business at 1105 East County Line Road. When he returned from a trip he observed damage and white paint transfer to the rear of his vehicle.

Surveillance camera footage from 1105 East County Line Road shows on 03/15/2022 at approximately 1255 a white Ford Transit Van, NJ XGR-V86 back into the rear of vehicle 1 then leave the area. The Van had a company name of Chevy's Cleaners located at 216 Bridge Avenue, Red Bank, NJ 07701, (732-747-6412). A NJMVC check of the registration confirmed the registration matched the company. I attempted to contact Chevy's Cleaners via telephone but was unsuccessful. A Lakewood Police Hit and Run Follow Up form was completed.

Vehicle 1 insurance: Plymouth Rock Assurance. Policy # PAA80002111384. End of report.

146 Officer's Signature

PEDERSON JON

147 Badge #

305

148 Reviewer

MY

Badge #

329

149 Case Status

☒ Pending ☐ Complete

96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report		
97	1 Case Number		10 Crash Occurred On:		11 Speed Limit		118a
01	22-022274		SOPHEE LN		25		10
98	2 Police Dept of		Road Name		Dir		118b
01	LAKEWOOD POLICE		AMY CT				
99	3 Station/Precinct		12 Route No.		Suffix		119a
01			13 Milepost		18 Speed Limit		25
09	4 Date of Crash		5 Day Of Week		6 Time (use 2400 hrs)		119b
01	03/23/22		WEDNESDAY		1742		
100a	7 Municipality		8 Total Killed		9 Total Injured		120a
01	1514						01
100b	23 Veh #		24 Policy No.		25 NJ Ins. Code		120b
04	1		17475212		134		
101	26 Driver's First Name		27 Sex		28 City		121a
02	KEVIN		M		LAKEWOOD		01
102	29 Number & Street		30 Eyes		31 State		121b
02	625 SOPHEE LN		02		NJ		
103	32 Driver's License Number		33 DOB		34 Expires		122
05	K25574337111552		11/21/1955		11 24		13
104	35 Owner's First Name		36 Number & Street		37 City		123
2	KEVIN		625 SOPHEE LN		LAKEWOOD		10
	38 Make		39 Model		40 Color		124
	TOYT		RAV		SIL		
	41 Year		42 Plate No.		43 State		125
	2010		BB86LX		NJ		
	44 VIN		45 Expires		46 Vehicle Removed To		126a
	2T3BF4DV2AW074067		10 22				28
	47 Authority		48 Alcohol/Drug Test		49 Hazardous Material		126b
	Owner		Given: No Yes Refused		None On Board Spill		
			Type: Breath Blood Urine		Hazard Class Placard No.		126c
			Results: 0, % Pending				126d
	50 Carrier No.		51 GVWR/GCWR		52 Motor Carrier or Government Entity		126e
	USDOT		Weight <= 10,000 lbs				
	MC/MX		Weight 10,001-26,000 lbs				26
			Weight >= 26,001 lbs				
	53 Veh #		54 Policy No.		55 NJ Ins. Code		127a
	2		PAA80002001683		963		26
	56 Driver's First Name		57 Number & Street		58 City		127b
	DAVID		807 BLASIVS AVE		BRICK		
	59 Sex		60 Eyes		61 State		127c
	M		02		NJ		
	62 Driver's License Number		63 DOB		64 Expires		127d
	1C4RJFAG2JC156849		09 22		09 22		
	65 Owner's First Name		66 Number & Street		67 City		127e
	DAVID		807 BLASIVS AVE		BRICK		
	68 Make		69 Model		70 Color		128
	JEEP		CHK		GRY		
	71 Year		72 Plate No.		73 State		28
	2018		H61MXY		NJ		
	74 VIN		75 Expires		76 Vehicle Removed To		129
	1C4RJFAG2JC156849		09 22				05
	77 Authority		78 Alcohol/Drug Test		79 Hazardous Material		130
	Owner		Given: No Yes Refused		None On Board Spill		05
			Type: Breath Blood Urine		Hazard Class Placard No.		07
			Results: 0, % Pending				
	80 Carrier No.		81 GVWR/GCWR		82 Motor Carrier or Government Entity		131
	USDOT		Weight <= 10,000 lbs				07
	MC/MX		Weight 10,001-26,000 lbs				02
			Weight >= 26,001 lbs				
	83 Charge		84 Summons. No.		85 Charge		132
	136 Charge		137 Summons. No.		138 Charge		07
	140 Charge		141 Summons. No.		142 Charge		02
			143 Summons. No.				02
	83		84		85		133
	86		87		88		
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	101		102		103		
	104		105		106		
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	623		624		625		
	626		627		628		
	629		630		631		
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	659		660		661		
	662		663		664		
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	677		678		679		
	680		681		682		
	683		684		685		

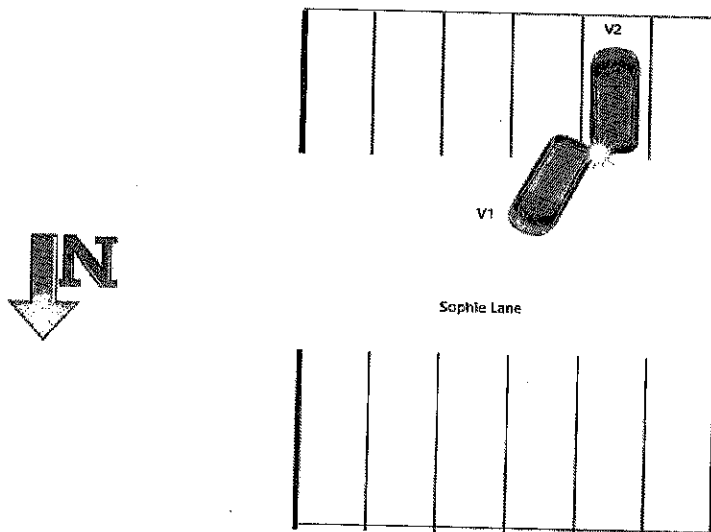
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD POLICE** Code: **01**Station: **-** Case No: **22-022274**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 backed into V2 in the parking lot of Covington Village on Sophie Lane. V2 was parked properly with no occupants.

D1 states that while reversing out of his parking spot he struck V2 in the rear which was parked.

Owner of V2 states that he was not in V2 at the time and was informed by D1 that his vehicle was struck by V1.

Through my investigation I determined D1 to be at fault for backing unsafely into V2 which was parked.

146 Officer's Signature

CAMACHO L

147 Badge #

828

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

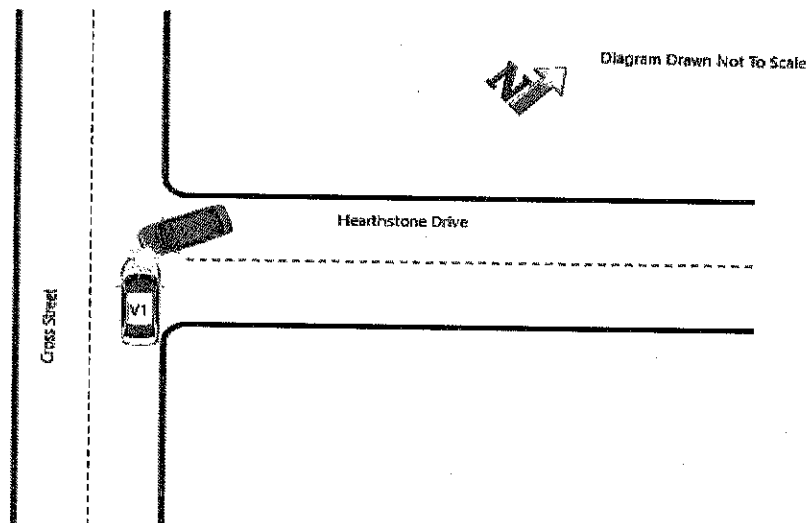
96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report			
04	1 Case Number		10 Crash Occurred On: CROSS STREET		11 Speed Limit 45		118a 25	
97	22-022293						118b -	
01	2 Police Dept of LAKEWOOD TOWNSHIP F01		☒ At Intersection With Road Name Dir		12 Route No. Suffix 13 Milepost		119a 04	
98			☐ Feet ☐ N ☐ E of HEARTHSTONE DRIVE		18 Speed Limit 25		119b -	
05	3 Station/Precinct		☐ S ☐ W		19 To 17 Cross Road Name		119c -	
99			14 15 16		20 Route/Name 22 Longitude		119d -	
07	4 Date of Crash mm dd yy		5 Day of Week WEDNESDAY		6 Time (use 2400 hrs) 2010		120a 01	
100a	03/23/22				7 Municipality Code 1514		120b -	
01			8 Total Killed --		9 Total Injured 1		121a 01	
100b	23 Veh # 1		24 Policy No.		25 NJ Ins. Code		121b -	
04	1						122 01	
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run						123 03	
02	26 Driver's First Name Initial Last Name		29 Sex M		53 Veh # 2		54 Policy No. 66KG2D	
102	GUILLERMO - SANCHEZ				55 Driver's First Name Initial Last Name		58 Sex F	
01	27 Number & Street 184 E 4TH ST; APT 100				56 Number & Street 103 JOANNA DR			
103	28 City LAKEWOOD		State Zip NJ 08701		57 City TOMS RIVER		State Zip NJ 08753	
01								
104	30 Eyes 02		DL Class -		Restrictions -		Endorsements -	
2			31 State -		60 Eyes 02		DL Class -	
105	32 Driver's License Number		33 DOB mm dd yyyy 01/11/1998		34 Expires mm yy		62 Driver's License Number	
03							63 DOB mm dd yyyy 07/01/1989	
106	35 Owner's First Name Initial Last Name		65 Owner's First Name Initial Last Name		66 Number & Street		67 City	
-	☐ Same As Driver ALEXANDER - TRUYENQUE		☐ Same As Driver SABA P FERMIN		518 ALLEN ST		State Zip PA 18202	
107	36 Number & Street 26 FRANKLIN AVE				68 Make MAZD		69 Model MZ6	
108	37 City SEASIDE HTS		State Zip NJ 08751		70 Color WHI		71 Year 2011	
01					72 Plate No. Y82NDD		73 State NJ	
109	38 Make MAZD		39 Model MZ6		40 Color WHI		41 Year 2011	
110	42 Plate No. Y82NDD		43 State NJ		44 VIN 1YVHZ8CH1B5M10928		45 Expires 02 22	
01	46 Vehicle Removed To TOTAL CAR CARE		☐ Driven ☐ Towed Disabled ☒ Towed Disabled & Impounded		74 VIN 3N1AB7AP9DL796794		75 Expires 04 22	
111			☐ Left At Scene ☐ Towed Impounded		76 Vehicle Removed To TOTAL CAR CARE		☐ Driven ☒ Towed Disabled ☐ Towed Disabled & Impounded	
112					77 Authority ☐ Owner ☒ Driver ☐ Police		79 Hazardous Material ☒ None ☐ On Board ☐ Spill	
113	47 Authority ☐ Owner ☐ Driver ☒ Police		48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused		78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused		79 Hazardous Material ☒ None ☐ On Board ☐ Spill	
114	49 Hazardous Material ☒ None ☐ On Board ☐ Spill		Type: ☐ Breath ☐ Blood ☐ Urine		Type: ☐ Breath ☐ Blood ☐ Urine		Results: 0. - % ☐ Pending	
115	Results: 0. - % ☐ Pending		Hazard Class		Placard No.		Hazard Class	
116	50 Carrier No. ☐ USDOT ☐ MC/MX		51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs		80 Carrier No. ☐ USDOT ☐ MC/MX		81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	
04	52 Motor Carrier or Government Entity		82 Motor Carrier or Government Entity		135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		136 Charge 39:3-4	
117							137 Summons. No. 291478	
03							138 Charge 39:3-10	
							139 Summons. No. 291480	
							140 Charge 39:6B-2	
							141 Summons. No. 291479	
							142 Charge 39:4-97	
							143 Summons. No. 292711	
							Names & Addresses of Occupants - If Deceased, Date & Time of Death	
A	1 01 01 05 24 M - - - 11 11 01 -		GUILLERMO - SANCHEZ		184 E 4TH ST; APT 100 LAKEWOOD NJ 08701 -			
B	2 01 01 02 32 F 04 08 02 11 11 04 6502		HEIDY L GONZALEZ		103 JOANNA DR TOMS RIVER NJ 08753 -			
C								
D								

New Jersey Police
Crash Investigation ReportPolice Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: - Case No: **22-022293**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
L														
E														
I														
N														
V														
O														
L														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

V1 was traveling north west on Cross Street and struck V2 who was attempting to turn left from Hearthstone Drive onto Cross Street.

D1 states that he was heading north west on Cross Street when V2 pulled out in front of him attempting to make a left turn onto Cross Street when he struck V2 on the driver side.

D2 states that she was attempting to turn left and travel south east onto Cross Street from Hearthstone Drive when she was struck by V1 on her driver side.

After my investigation I determined D2 to be at fault for failing to yield to oncoming traffic and turning in front of V1.

D1 was driving an unregistered vehicle expired in 02/2022 without a valid driver's license and no insurance on the vehicle. V1 was impounded to Total Car Care and D1 was issued summonses for unregistered vehicle (39:3-4) unlicensed driver (39:3-10) and uninsured vehicle (39:6B-2). V2 was towed by Total Car Care and D2 was issued a summons for careless driving (39:4-97).

V2 insurance is Root Insurance no insurance code found*. Address is 80 E Rich St Suite 500, Columbus, OH 43215 Phone number: (866) 980-9431.

146 Officer's Signature

CAMACHO L

147 Badge #

828

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

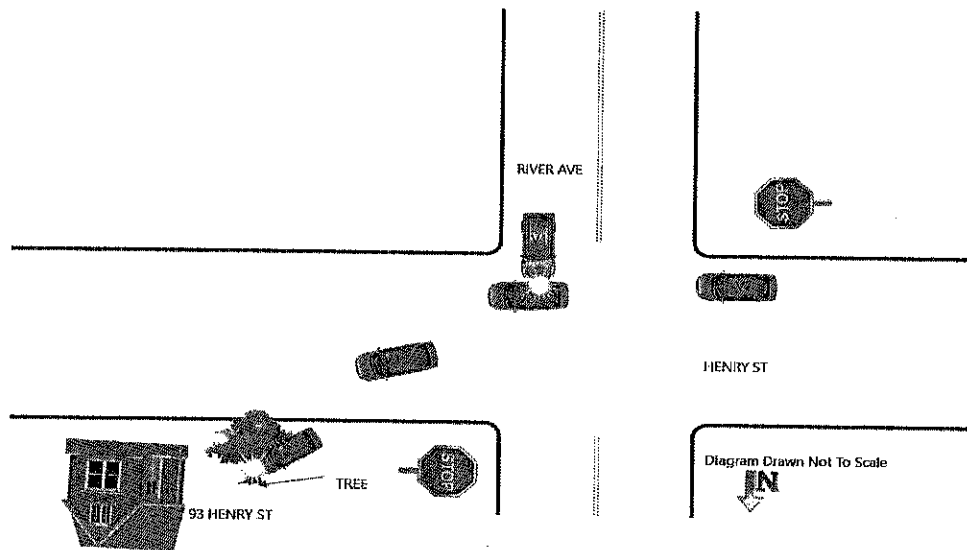
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-022311**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
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V														
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D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated she was Northbound on River Ave and was approaching the intersection of Henry ST. She stated as she was going forward, vehicle 2 crashed into her vehicle.

Driver of vehicle 2 stated he was Eastbound on Henry ST and was stopped at the stop sign located at the intersection of River Ave. He stated when it was safe he went forward but vehicle 1 crashed into the side of his vehicle. He stated the impact caused his vehicle to go forward and crash into a tree where he came to a stop. He stated vehicle 1 came out of nowhere.

In my investigation I find vehicle 2 at fault for this crash for driver inattention and failure to yield to vehicle.

*the owner of 93 Henry st was advised of the accident.

146 Officer's Signature

SORIANO J

147 Badge #

352

148 Reviewer

E. MIICK

Badge #

307

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2 ☐ Fatal										New Jersey Police Crash Investigation Report										☒ Reportable ☐ Non-Reportable ☐ Change Report										
05	1 Case Number 22-022317										10 Crash Occurred On: RIVER AVE										11 Speed Limit 45										118a
01	2 Police Dept of LAKEWOOD TOWNSHIP F01										Code										12 Route No. 0009										09
07	3 Station/Precinct										10 At Intersection With ☐ Road Name										13 Milepost										118b
02	4 Date of Crash mm dd yy 03/23/22										5 Day Of Week WEDNESDAY										6 Time (use 2400 hrs) 2256										25
01	7 Municipality Code 1514										8 Total Killed --										9 Total Injured --										119a
04	23 Veh # 1										24 Policy No. F986814-2										25 NJ Ins. Code 426										119b
02	26 Driver's First Name MICHELE										27 Number & Street 802 TWIN OAKS DR										28 City LAKEWOOD										01
02	29 Sex S										30 Eyes 6										31 State NJ										01
05	32 Driver's License Number B27045448257636										33 DOB mm dd yyyy 07/06/1963										34 Expires mm yy 07 26										07
01	35 Owner's First Name ZOLTAN										36 Number & Street 802 TWIN OAKS DR										37 City LAKEWOOD										07
04	38 Make PCAI										39 Model TOYT										40 Color BLU										04
01	41 Year 2007										42 Plate No. RH514Z										43 State NJ										04
01	44 VIN 2T1BR32EX7C813600										45 Expires 05 23										46 Vehicle Removed To MOISHEY'S TOWING										04
01	47 Authority ☐ Owner ☒ Driver ☐ Police										48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused										49 Hazardous Material ☒ None ☐ On Board ☐ Spill										04
03	50 Carrier No. ☐ USDOT ☒ None										51 GVWR/GCWR ☐ Weight <= 10,000 lbs										52 Motor Carrier or Government Entity										06
03	53 GVWR/GCWR ☐ Weight 10,001-25,000 lbs										54 GVWR/GCWR ☐ Weight >= 25,001 lbs										55 NJ Ins. Code 054										06
01	56 Driver's First Name THOMAS										57 Number & Street 1531 MAPLE AVE										58 City HILLSIDE										06
01	59 Sex M										60 Eyes 5										61 State NJ										06
01	62 Driver's License Number B07257407106015										63 DOB mm dd yyyy 06/17/2001										64 Expires mm yy 06 23										06
01	65 Owner's First Name JOSHUA										66 Number & Street 22 TOVA DR										67 City LAKEWOOD										06
01	68 Make CHRY										69 Model PAC										70 Color BLK										06
01	71 Year 2020										72 Plate No. L53MSF										73 State NJ										06
01	74 VIN 2C4RC1BG2LR132668										75 Expires 08 24										76 Vehicle Removed To										06
01	77 Authority ☐ Owner ☒ Driver ☐ Police										78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused										79 Hazardous Material ☒ None ☐ On Board ☐ Spill										06
01	80 Carrier No. ☐ USDOT ☒ None										81 GVWR/GCWR ☐ Weight <= 10,000 lbs										82 Motor Carrier or Government Entity										06
01	83 GVWR/GCWR ☐ Weight 10,001-25,000 lbs										84 GVWR/GCWR ☐ Weight >= 25,001 lbs										85 NJ Ins. Code 054										06
01	86 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No										87 Summons No.										88 Charge										06
01	89 Summons No.										90 Charge										91 Summons No.										06
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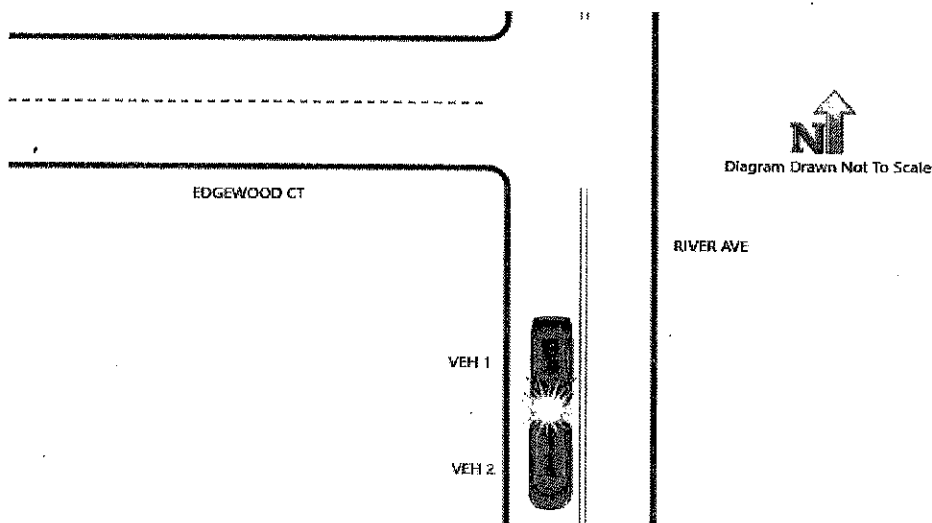
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: Case No: **22-022317**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
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144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

VEHICLES ONES AND TWO WERE TRAVELING SOUTH ON RIVER AVE PASSING EDGEWOOD CT. VEHICLE TWO BEGAN TO SLOW TO A STOP. VEHICLE ONE ATTEMPTED TO SLOW BUT DID NOT AND STRUCK THE REAR OF VEHICLE TWO. DRIVER ONE STATED AS SHE ATTEMPTED SLOW DOWN, HER VEHICLE SLID AND STRUCK THE REAR OF VEHICLE TWO. DRIVER TWO STATED HE WAS SLOWING DOWN WHEN VEHICLE ONE STRUCK THE REAR OF HIS VEHICLE.

DUE TO MY INVESTIGATION I FOUND DRIVER ONE TO BE AT FAULT FOR FOLLOWING TOO CLOSELY. THE WET ROADWAY CONDITIONS COULD BE CONSIDERED A CONTRIBUTING FACTOR. NO INJURIES WERE REPORTED AT THE SCENE. VEHICLE ONE WAS TOWED BY MOISHEY'S TOWING. NO SUMMONS WERE ISSUED.

146 Officer's Signature
SOLOMON A147 Badge #
380148 Reviewer
SGT. M.MARZOCCABadge #
314149 Case Status
☐ Pending ☒ Complete

96	PAGE 1 OF 3		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report																							
05	1 Case Number 22-022398										10 Crash Occurred On: PRINCETON AVE										11 Speed Limit 45		118a		25																	
97	2 Police Dept of LAKEWOOD TOWNSHIP										Code 01		☐ At Intersection With Road Name Dir										12 Route No. Suffix 13 Milepost		118b		-															
98	3 Station/Precinct												☒ Feet ☐ N ☐ E of: E COUNTY LINE RD										18 Speed Limit		45		-															
01	4 Date of Crash 03/24/22										5 Day Of Week THURSDAY		6 Time (use 2400 hrs) 0804		7 Municipality Code 1514		8 Total Killed --		9 Total Injured --		19 To From:		17 Cross Road Name		☐ NB ☐ EB		09															
100a																					20 Route/Name		☐ SB ☐ WB		119b																	
01	23 Veh # 1										24 Policy No. BA2997BD										25 NJ Ins. Code						120a		01													
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run																										120b		-													
02	26 Driver's First Name ERNESTINO										Initial Last Name - RINCON		29 Sex M		56 Driver's First Name JOEL										Initial Last Name - WERZBERGER		59 Sex M		121a		01											
02	27 Number & Street 57 SHELL STREET										State Zip NJ 08722		57 Number & Street 135 COLONY CIR										State Zip NJ 08701				121b		-													
01	28 City BEACHWOOD												58 City LAKEWOOD														122		07													
104	30 Eyes 2										DL Class B		Restrictions -		Endorsements -		31 State NJ		60 Eyes 2										DL Class A		Restrictions -		Endorsements -		61 State NJ		123					
01	32 Driver's License Number R44622340011732										33 DOB mm dd yyyy 11/11/1973		34 Expires mm yy 11 24		62 Driver's License Number W27864050008882										63 DOB mm dd yyyy 08/19/1988		64 Expires mm yy 08 25		124		01											
106	35 Owner's First Name -										Initial Last Name -		JAYS BUS SERVICE -		65 Owner's First Name JOEL										Initial Last Name -		WERZBERGER -		125		04											
107	36 Number & Street 672 CROSS ST										State Zip NJ 08701		66 Number & Street 135 COLONY CIR										State Zip NJ 08701				126a		26													
108	37 City LAKEWOOD												67 City LAKEWOOD														126b		-													
01	38 Make IC										39 Model INT		40 Color YEL		41 Year 2019		42 Plate No. N270S1		43 State NJ		68 Make TES										69 Model MOD		70 Color BLK		71 Year 2021		72 Plate No. H64NZJ		73 State NJ		126c	
110	44 VIN 4DRBUC8P5KB091091										45 Expires 08 22		74 VIN 5YJYGAEEXMF228300										75 Expires 07 25				126d		-													
02	46 Vehicle Removed To												76 Vehicle Removed To														126e		26													
112	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded												☐ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded														127a		26													
09	☐ Left At Scene ☐ Towed Impounded												☒ Left At Scene ☐ Towed Impounded														127b		-													
113	47 Authority -										☐ Owner ☒ Driver ☐ Police		77 Authority -										☐ Owner ☒ Driver ☐ Police				127c		-													
01	48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused										Type: ☐ Breath ☐ Blood ☐ Urine		Results: 0, - % ☐ Pending		49 Hazardous Material ☒ None ☐ On Board ☐ Spill		Hazard Class Placard No.		78 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused										Type: ☐ Breath ☐ Blood ☐ Urine		Results: 0, - % ☐ Pending		79 Hazardous Material ☒ None ☐ On Board ☐ Spill		Hazard Class Placard No.		127d					
115																																					127e					
03	50 Carrier No. ☒ USDOT 1926134 ☐ None										☐ MC/MX				51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs				80 Carrier No. ☐ USDOT ☐ MC/MX ☒ None										☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs				81 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs				127f					
117																																					127g					
03	52 Motor Carrier or Government Entity												82 Motor Carrier or Government Entity														128		26													
	Number & Street												Number & Street														129		07													
	City										State Zip		City										State Zip				130		07													
	135 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No																										131		02													
	Oper. 136 Charge										137 Summons. No.		Oper. 138 Charge										139 Summons. No.		132		02															
	Oper. 140 Charge										141 Summons. No.		Oper. 142 Charge										143 Summons. No.		133		03															
	83 84 85 86 87 88 89 90 91 92 93 94 95												Names & Addresses of Occupants - If Deceased, Date & Time of Death												134		04															
A	01 01 01 05 48 M - - - 11 04 - -												ERNESTINO - RINCON 57 SHELL STREET BEACHWOOD NJ 08722												135		-															
B	02 01 01 05 33 M - - - 11 04 - -												JOEL - WERZBERGER 135 COLONY CIR LAKEWOOD NJ 08701												136		-															
C																									137																	
D																									138																	

STATE OF NEW JERSEY
MOTOR VEHICLE CRASH DESCRIPTIONPolice Agency **LAKEWOOD TOWNSHIP POLICE DEPT.**Station _____ Case No. **22-022398**

- | | | |
|-----|-------------------|------------------|
| 1. | TZVI | BERGMAN |
| 2. | ELI | GLIKSBER |
| 3. | SHAYA | POLLAK |
| 4. | DANIEL | POLLAK |
| 5. | SHMUEL | GLIKSBERG |
| 6. | SHAELOM | NERZIG |
| 7. | SHALOM | RAGUS |
| 8. | CHAIM | R |
| 9. | BORUCHKHON | |
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SCHOOL BUS
(full size)

● DRIVER			DOOR →	
1	2	3	4	5
6	7	8	9	10
11	12	13	14	15
16	17	18	19	20
21	22	23	24	25
26	27	28	29	30
31	32	33	34	35
36	37	38	39	40
41	42	43	44	45
46	47	48	49	50
51	52		53	54

MINIBUS

● DRIVER			DOOR →	
1	2		3	4
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9	10		11	12
13	14		15	16

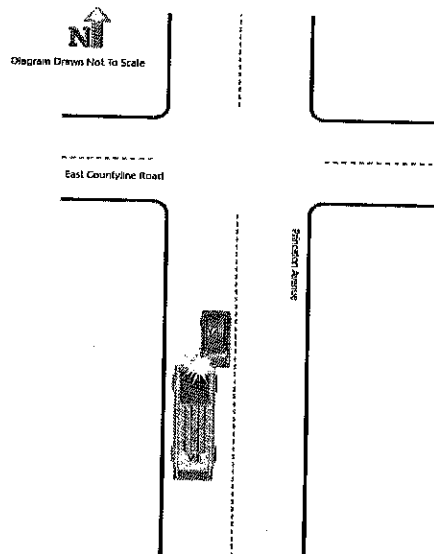
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-022398**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
ALL INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Driver of vehicle 1 stated he was traveling South on Princeton Avenue. Driver of vehicle 1 stated he was slowing down and vehicle 2 struck the rear of vehicle 1. Vehicle 1 had moderate but functionable rear end damage. Driver of vehicle 1 had no complaint of pain.

Driver of vehicle 2 stated he was traveling South on Princeton Avenue. Driver of vehicle 2 stated vehicle 1 slowed down and he was unable to stop in time striking the rear driver side of vehicle 1. Vehicle 2 had moderate damage disabling it. Driver of vehicle 2 had no complaint of pain. Vehicle 2 was parked legally on Princeton Avenue.

Vehicle 1 Insurance Information.**BA2997BD****23787****Nationwide Insurance Group**

146 Officer's Signature

ORTIZ, K

147 Badge #

377

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

Form 104-1 (Rev. 12-13-10) New Jersey Police Crash Investigation Report

1 PAGE 1 OF 2 Fatal

22-022412

LAKEWOOD TOWNSHIP F01

03/24/22 THURSDAY

0935 1514

MADISON AVENUE

NORTH LAKE DRIVE

40.089710 -74.216240

ANTHONY JOHNSON

BRACHA MEZEI

1013 COUNTRY LN

418 7TH ST; APT. 17E

EWING NJ 08628

LAKEWOOD NJ 08701

FORD F15 BLK 2019 L16NDM NJ

TOYT AVA BLU 2006 GZR3122 NY

1FTEW1EP2KFC67849

4T1BK36B76U126124

135 Damage To Other Property

Oper. 136 Charge 137 Summons. No.

Oper. 140 Charge 141 Summons. No.

Oper. 142 Charge 143 Summons. No.

83 84 85 86 87 88 89 90 91 92 93 94 95

Names & Addresses of Occupants - If Deceased, Date & Time of Death

ANTHONY JOHNSON 1013 COUNTRY LN EWING NJ 08628

BRACHA MEZEI 418 7TH ST; APT. 17E LAKEWOOD NJ 08701

JONATHAN ARANOFF 418 7TH ST; APT. 17E LAKEWOOD NJ 08701

New Jersey Police Crash Investigation Report

Police Dept: LAKEWOOD TOWNSHIP Code: 01Station: - Case No: 22-022412

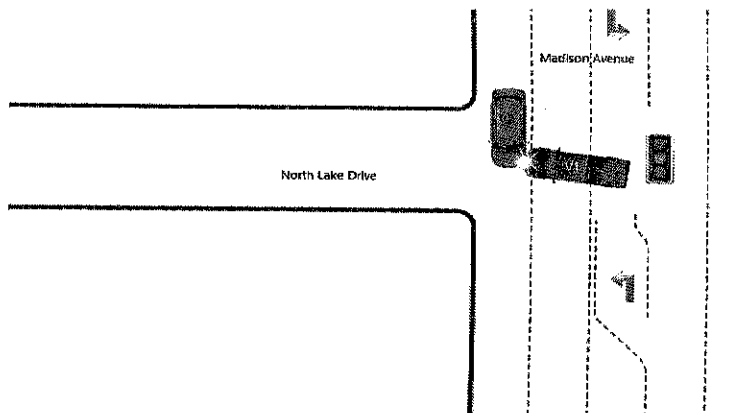
(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
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144 Crash Diagram (NOT TO SCALE)



Diagram Drawn Not To Scale



145 Crash Description/Narrative

Vehicle 1 was traveling Northbound on Madison Avenue. Driver 1 said he was in the left turning lane and saw that the traffic stopped on the left turning lane (Southbound). Driver 1 said it looked safe to make the left; as V1 turns left, V2 comes from the right lane and collides with V1.

Vehicle 2 was traveling Southbound on Madison Avenue. Driver 2 mentioned that she was traveling on the right lane going along with traffic. As she reached the intersection of Madison Ave. and North Lake Drive, she saw V1 make the left turn and collide with her vehicle.

Investigation reveals that Vehicle 1 was traveling Northbound, and Vehicle 2 was traveling Southbound on Madison Avenue. Due to conflicting stories, I can not determine who is at fault.

* V2 insurance code is 356 USAA Casualty Insurance company

146 Officer's Signature

CUZCO-BENITES W

147 Badge #

407

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

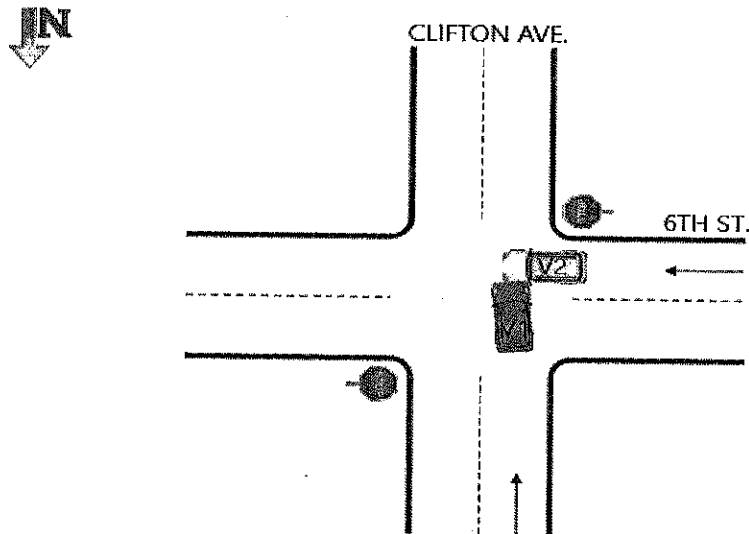
PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report	
1 Case Number 22-022440		10 Crash Occurred On: CLIFTON AVENUE		11 Speed Limit 25	
2 Police Dept of LAKEWOOD TOWNSHIP F01		☒ At Intersection With Road Name 6TH STREET		12 Route No. Suffix 13 Milepost 25	
3 Station/Precinct		☐ Feet ☐ N ☐ E of: ☐ S ☐ W		18 Speed Limit 25	
4 Date of Crash mm dd yy 03/24/22		5 Day Of Week THURSDAY		19 To 20 Route/Name 40.09603 -74.21535	
6 Time (use 2400 hrs) 1244		7 Municipality Code 1514		21 Latitude 22 Longitude	
8 Total Killed		9 Total Injured		23 Veh # 24 Policy No. 1 4200-81-09-03	
25 NJ Ins. Code 148		53 Veh # 54 Policy No. 2 5129J 008951		55 NJ Ins. Code 917	
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run		26 Driver's First Name Initial Last Name ESTHER - CENSOR	
27 Number & Street 7 CABERNET DR		28 City LAKEWOOD		29 Sex F	
30 Eyes DL Class Restrictions Endorsements 2 D - - NJ		31 State NJ		56 Driver's First Name Initial Last Name ESTHER - FUCHS	
32 Driver's License Number C25822390051872		33 DOB mm dd yyyy 01/09/1987		34 Expires mm yy 01 24	
35 Owner's First Name Initial Last Name ELLIOT A CENSOR		36 Number & Street 7 CABERNET DR		37 City LAKEWOOD	
38 Make 39 Model 40 Color 41 Year 42 Plate No. 43 State TOYT SIE SIL 2015 J46PHK NJ		44 VIN 5TDKK3DC8FS596053		45 Expires 11 22	
46 Vehicle Removed To ☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded		47 Authority ☒ Owner ☐ Driver ☐ Police		48 Alcohol/Drug Test Given: ☒ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0. - % ☐ Pending	
49 Hazardous Material ☒ None ☐ On Board ☐ Spill		50 Carrier No. ☐ USDOT ☐ MC/MX ☒ None		51 GVWR/GCWR ☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs	
52 Motor Carrier or Government Entity Number & Street City State Zip		53 Motor Carrier or Government Entity Number & Street City State Zip		54 Motor Carrier or Government Entity Number & Street City State Zip	
55 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		56 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No		57 Damage To Other Property ☐ Yes (If Yes, describe) ☒ No	
58 Oper. 136 Charge		59 Oper. 137 Summons. No.		60 Oper. 138 Charge	
61 Oper. 140 Charge		62 Oper. 141 Summons. No.		63 Oper. 142 Charge	
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229 Oper. 590 Summons. No.		371 Oper. 591 Summons. No.		372 Oper. 592 Summons. No.	
230 Oper. 593 Summons. No.		373 Oper. 594 Summons. No.		374 Oper. 595 Summons. No.	
231 Oper. 596 Summons. No.		375 Oper. 597 Summons. No.		376 Oper. 598 Summons. No.	
232 Oper. 599 Summons. No.		377 Oper. 600 Summons. No.		378 Oper. 601 Summons. No.	
233 Oper. 602 Summons. No.		379 Oper. 603 Summons. No.		380 Oper. 604 Summons. No.	
234 Oper. 605 Summons. No.		381 Oper. 606 Summons. No.		382 Oper. 607 Summons. No.	
235 Oper. 608 Summons. No.		383 Oper. 609 Summons. No.		384 Oper. 610 Summons. No.	
236 Oper. 611 Summons. No.		385 Oper. 612 Summons. No.		386 Oper. 613 Summons. No.	
237 Oper. 614 Summons. No.		387 Oper. 615 Summons. No.		388 Oper. 616 Summons. No.	
238 Oper. 617 Summons. No.		389 Oper. 618 Summons. No.		390 Oper. 619 Summons. No.	

New Jersey Police
Crash Investigation ReportPolice Dept: LAKEWOOD TOWNSHIP Code: 01Station: _____ Case No: 22-022440

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
ALL IF INVOLVED	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

DRIVER OF VEHICLE 1 STATED SHE WAS TRAVELING SOUTH ON CLIFTON AVENUE WHEN VEHICLE 2 CAME THROUGH A STOP SIGN AT THE INTERSECTION WITH 6TH STREET.

DRIVER OF VEHICLE 2 STATED SHE WAS STOPPED AT A STOP SIGN ON 6TH STREET WAITING TO MAKE A RIGHT TURN. SHE WENT ON TO SAY THAT THERE WERE SEVERAL PARKED VEHICLE'S ON CLIFTON AVENUE ALONG THE WEST BOUND CURB THAT WERE BLOCKING HER VIEW. WHEN SHE THOUGHT THE ROADWAY WAS CLEAR SHE PROCEEDED TO MAKE A RIGHT TURN ONTO CLIFTON AVENUE AND WAS STRUCK BY VEHICLE 1.

THIS INVESTIGATION DETERMINED THAT ALL THE PARKED VEHICLES ON CLIFTON AVENUE WERE PARKED LEGALLY. ALSO, THE DRIVER OF VEHICLE 2 FAILED TO STOP OR YIELD TO TRAFFIC.

146 Officer's Signature

SEUNATH K

147 Badge #

284

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending☒ Complete

96	PAGE	1	OF	2	☐ Fatal	New Jersey Police Crash Investigation Report										☒ Reportable	☐ Non-Reportable	☐ Change Report																																																																																																																				
05	1 Case Number	22-022441										10 Crash Occurred On:	NEW HAMPSHIRE AVE										11 Speed Limit	50	118a	25																																																																																																												
01	2 Police Dept of	LAKEWOOD TOWNSHIP F01										Code	F01	12 Route No.											Suffix		13 Milepost	35	118b	-																																																																																																								
01	3 Station/Precinct											14											15											16											17 Cross Road Name	OAK ST	18 Speed Limit	35	119a	-																																																																																				
05	4 Date of Crash	03/24/22										5 Day Of Week	THURSDAY										6 Time (use 2400 hrs)	1257										7 Municipality Code	1514										8 Total Killed	--										9 Total Injured	--										21 Latitude	40.060400										22 Longitude	-74.195010										119b	04																																												
100a	23 Veh #	1										24 Policy No.	6053395684										25 NJ Ins. Code	100										53 Veh #	2										54 Policy No.	4153001435										55 NJ Ins. Code	148										120a	01																																																																		
04	26 Driver's First Name	ROBERT										Initial	W										Last Name	NEWMAN										29 Sex	M										56 Driver's First Name	RECHEL										Initial	-										Last Name	BERGER										59 Sex	F										120b	-																																												
02	27 Number & Street	840 SPRINGFIELD AVE										State	NJ										Zip	08741										57 Number & Street	3 CABINFIELD CIR										State	NJ										Zip	08701										121a	01																																																																		
02	28 City	PINE BEACH										State	NJ										Zip	08741										58 City	LAKEWOOD										State	NJ										Zip	08701										121b	-																																																																		
2	30 Eyes	04										DL Class	D										Restrictions											Endorsements											31 State	NJ										60 Eyes	02										DL Class	D										Restrictions											Endorsements											61 State	NJ										122	01																						
105	32 Driver's License Number	N29646588610934										33 DOB	10/04/1993										34 Expires	10										26	62 Driver's License Number	B26846460052002										63 DOB	02/01/2000										64 Expires	02										26	123	03																																																																
07	35 Owner's First Name	ROBERT										Initial	W										Last Name	NEWMAN										65 Owner's First Name	YISROEL										Initial	-										Last Name	BERGER										124	03																																																																		
106	36 Number & Street	840 SPRINGFIELD AVE										State	NJ										Zip	08741										66 Number & Street	3 CABINFIELD CIR										State	NJ										Zip	08701										125	03																																																																		
02	37 City	PINE BEACH										State	NJ										Zip	08741										67 City	LAKEWOOD										State	NJ										Zip	08701										126a	26																																																																		
109	38 Make	FORD										39 Model	ESC										40 Color	RD										41 Year	2018										42 Plate No.	S78NJT										43 State	NJ										68 Make	TOYT										69 Model	AVA										70 Color	SIL										71 Year	2003										72 Plate No.	W18PFL										73 State	NJ										126b	-
01	44 VIN	1FMCU9GD1JUB93764										45 Expires	02										23	74 VIN	4T1BF28B73U316688										75 Expires	10										22	126c	-																																																																																						
01	46 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded										76 Vehicle Removed To	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded ☐ Left At Scene ☐ Towed Impounded										126d	-																																																																																																														
112	47 Authority	☒ Owner ☐ Driver ☐ Police										77 Authority	☐ Owner ☒ Driver ☐ Police										126e	26																																																																																																														
114	48 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused ☐ Pending										49 Hazardous Material	☒ None ☐ On Board ☐ Spill										78 Alcohol/Drug Test	Given: ☒ No ☐ Yes ☐ Refused ☐ Pending										79 Hazardous Material	☒ None ☐ On Board ☐ Spill										127a	26																																																																																								
115	Type: ☐ Breath ☐ Blood ☐ Urine											Hazard Class											Placard No.											Type: ☐ Breath ☐ Blood ☐ Urine											Hazard Class											Placard No.											127b	-																																																																		
116	50 Carrier No.	☐ USDOT ☐ MC/MX ☒ None										51 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										80 Carrier No.	☐ USDOT ☐ MC/MX ☒ None										81 GVWR/GCWR	☐ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs										127c	-																																																																																								
04	52 Motor Carrier or Government Entity											82 Motor Carrier or Government Entity											127d	-																																																																																																														
117	Number & Street											Number & Street											127e	26																																																																																																														
02	City											City											128	08																																																																																																														
	State											State											129	08																																																																																																														
	Zip											Zip											130	08																																																																																																														
	135 Damage To Other Property	☐ Yes (If Yes, describe) ☒ No										131											132	11																																																																																																														
	Oper.	136 Charge										137 Summons. No.											Oper.	138 Charge										139 Summons. No.											133	03																																																																																								
	Oper.	140 Charge										141 Summons. No.											Oper.	142 Charge										143 Summons. No.											134	03																																																																																								
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death										135	03																																																																																																													
A	1	01	01	-	28	M	-	-	-	11	04	-	-	ROBERT W NEWMAN 840 SPRINGFIELD AVE PINE BEACH NJ 08741										-																																																																																																														
B	2	01	01	-	22	F	-	-	-	11	04	-	-	RECHEL - BERGER 3 CABINFIELD CIR LAKEWOOD NJ 08701										-																																																																																																														
C																																																																																																																																						
D																																																																																																																																						

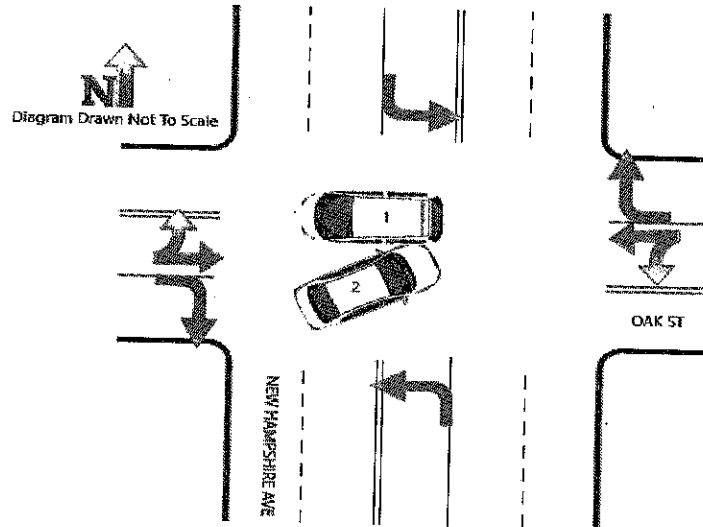
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: _____ Case No: **22-022441**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	
	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
L														
L														
I														
N														
V														
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L														
V														
E														
I														
D														
J														

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

Vehicle #1 was traveling West on Oak St at the intersection with New Hampshire Ave. Vehicle #2 was traveling East on Oak St at the intersection with New Hampshire Ave. Vehicle #2 began making a left turn to travel North on New Hampshire Ave. The vehicles collided in the roadway. Driver #1 stated that he was driving through the intersection and vehicle #2 turned into his vehicle. Driver #2 stated that she thought it was clear to make her turn. Driver #2 failed to yield the right of way to vehicle #1 causing the crash.

146 Officer's Signature

PRZEWOZNIK J

147 Badge #

308

148 Reviewer

MY

Badge #

329

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		New Jersey Police Crash Investigation Report		☒ Reportable ☐ Non-Reportable ☐ Change Report			
05	1 Case Number		22-022445		10 Crash Occurred On: 4TH ST		11 Speed Limit 25	
01	2 Police Dept of		LAKEWOOD TOWNSHIP F01		12 Route No.		13 Milepost	
01	3 Station/Precinct				14 At Intersection With		15 Road Name	
07	4 Date of Crash		03/24/22		16 Feet		17 Cross Road Name	
01	5 Day Of Week		THURSDAY		18 Speed Limit		19 To	
04	23 Veh #		1		20 Route/Name		21 Latitude	
04	24 Policy No.		F3764387		22 Longitude		23 Total Injured	
02	26 Driver's First Name		NOSON		24 NJ Ins. Code		25 Total Killed	
02	27 Number & Street		19 WILLIAMS ST		26 Policy No.		27 Total Injured	
02	28 City		LAKEWOOD		28 Policy No.		29 Total Injured	
2	29 State		NJ		29 Policy No.		30 Total Injured	
02	30 Eyes		2		30 Policy No.		31 Total Injured	
02	31 DL Class		D		31 Policy No.		32 Total Injured	
02	32 Driver's License Number		B05766007209982		32 Policy No.		33 Total Injured	
02	33 DOB		09/18/1998		33 Policy No.		34 Total Injured	
02	34 Expires		09/26		34 Policy No.		35 Total Injured	
02	35 Owner's First Name		NOSON		35 Policy No.		36 Total Injured	
02	36 Number & Street		19 WILLIAMS ST		36 Policy No.		37 Total Injured	
02	37 City		LAKEWOOD		37 Policy No.		38 Total Injured	
02	38 State		NJ		38 Policy No.		39 Total Injured	
02	39 Make		TOYT		39 Policy No.		40 Total Injured	
02	40 Model		CAM		40 Policy No.		41 Total Injured	
02	41 Color		GRY		41 Policy No.		42 Total Injured	
02	42 Year		2017		42 Policy No.		43 Total Injured	
02	43 Plate No.		T89PGD		43 Policy No.		44 Total Injured	
02	44 VIN		4T1BF1FK7HU446717		44 Policy No.		45 Total Injured	
02	45 Expires		01/23		45 Policy No.		46 Total Injured	
02	46 Vehicle Removed To		MOISHY'S TOWING		46 Policy No.		47 Total Injured	
02	47 Authority		Owner		47 Policy No.		48 Total Injured	
02	48 Alcohol/Drug Test		No		48 Policy No.		49 Total Injured	
02	49 Hazardous Material		None		49 Policy No.		50 Total Injured	
02	50 Carrier No.		None		50 Policy No.		51 Total Injured	
02	51 GVWR/GCWR		None		51 Policy No.		52 Total Injured	
02	52 Motor Carrier or Government Entity		No		52 Policy No.		53 Total Injured	
02	53 Number & Street				53 Policy No.		54 Total Injured	
02	54 City				54 Policy No.		55 Total Injured	
02	55 State				55 Policy No.		56 Total Injured	
02	56 Damage To Other Property		No		56 Policy No.		57 Total Injured	
02	57 Charge		39:3-4		57 Policy No.		58 Total Injured	
02	58 Summons No.		A291513		58 Policy No.		59 Total Injured	
02	59 Charge				59 Policy No.		60 Total Injured	
02	60 Summons No.				60 Policy No.		61 Total Injured	
02	61 Names & Addresses of Occupants - If Deceased, Date & Time of Death				61 Policy No.		62 Total Injured	
02	62 Names & Addresses of Occupants - If Deceased, Date & Time of Death				62 Policy No.		63 Total Injured	
02	63 Names & Addresses of Occupants - If Deceased, Date & Time of Death				63 Policy No.		64 Total Injured	
02	64 Names & Addresses of Occupants - If Deceased, Date & Time of Death				64 Policy No.		65 Total Injured	
02	65 Names & Addresses of Occupants - If Deceased, Date & Time of Death				65 Policy No.		66 Total Injured	
02	66 Names & Addresses of Occupants - If Deceased, Date & Time of Death				66 Policy No.		67 Total Injured	
02	67 Names & Addresses of Occupants - If Deceased, Date & Time of Death				67 Policy No.		68 Total Injured	
02	68 Names & Addresses of Occupants - If Deceased, Date & Time of Death				68 Policy No.		69 Total Injured	
02	69 Names & Addresses of Occupants - If Deceased, Date & Time of Death				69 Policy No.		70 Total Injured	
02	70 Names & Addresses of Occupants - If Deceased, Date & Time of Death				70 Policy No.		71 Total Injured	
02	71 Names & Addresses of Occupants - If Deceased, Date & Time of Death				71 Policy No.		72 Total Injured	
02	72 Names & Addresses of Occupants - If Deceased, Date & Time of Death				72 Policy No.		73 Total Injured	
02	73 Names & Addresses of Occupants - If Deceased, Date & Time of Death				73 Policy No.		74 Total Injured	
02	74 Names & Addresses of Occupants - If Deceased, Date & Time of Death				74 Policy No.		75 Total Injured	
02	75 Names & Addresses of Occupants - If Deceased, Date & Time of Death				75 Policy No.		76 Total Injured	
02	76 Names & Addresses of Occupants - If Deceased, Date & Time of Death				76 Policy No.		77 Total Injured	
02	77 Names & Addresses of Occupants - If Deceased, Date & Time of Death				77 Policy No.		78 Total Injured	
02	78 Names & Addresses of Occupants - If Deceased, Date & Time of Death				78 Policy No.		79 Total Injured	
02	79 Names & Addresses of Occupants - If Deceased, Date & Time of Death				79 Policy No.		80 Total Injured	
02	80 Names & Addresses of Occupants - If Deceased, Date & Time of Death				80 Policy No.		81 Total Injured	
02	81 Names & Addresses of Occupants - If Deceased, Date & Time of Death				81 Policy No.		82 Total Injured	
02	82 Names & Addresses of Occupants - If Deceased, Date & Time of Death				82 Policy No.		83 Total Injured	
02	83 Names & Addresses of Occupants - If Deceased, Date & Time of Death				83 Policy No.		84 Total Injured	
02	84 Names & Addresses of Occupants - If Deceased, Date & Time of Death				84 Policy No.		85 Total Injured	
02	85 Names & Addresses of Occupants - If Deceased, Date & Time of Death				85 Policy No.		86 Total Injured	
02	86 Names & Addresses of Occupants - If Deceased, Date & Time of Death				86 Policy No.		87 Total Injured	
02	87 Names & Addresses of Occupants - If Deceased, Date & Time of Death				87 Policy No.		88 Total Injured	
02	88 Names & Addresses of Occupants - If Deceased, Date & Time of Death				88 Policy No.		89 Total Injured	
02	89 Names & Addresses of Occupants - If Deceased, Date & Time of Death				89 Policy No.		90 Total Injured	
02	90 Names & Addresses of Occupants - If Deceased, Date & Time of Death				90 Policy No.		91 Total Injured	
02	91 Names & Addresses of Occupants - If Deceased, Date & Time of Death				91 Policy No.		92 Total Injured	
02	92 Names & Addresses of Occupants - If Deceased, Date & Time of Death				92 Policy No.		93 Total Injured	
02	93 Names & Addresses of Occupants - If Deceased, Date & Time of Death				93 Policy No.		94 Total Injured	
02	94 Names & Addresses of Occupants - If Deceased, Date & Time of Death				94 Policy No.		95 Total Injured	
02	95 Names & Addresses of Occupants - If Deceased, Date & Time of Death				95 Policy No.		96 Total Injured	

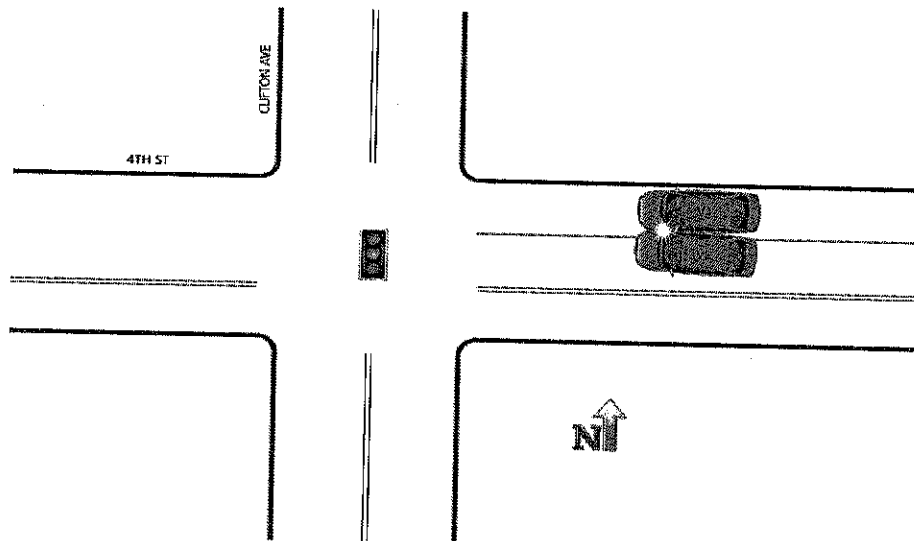
New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **-** Case No: **22-022445**

(Refer to vehicle by number)

ALL INVOLVED	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



145 Crash Description/Narrative

VEHICLE 1 WAS TRAVELING WEST ON 4TH ST APPROACHING CLIFTON AVE. VEHICLE 2 WAS ALSO TRAVELING WEST ON 4TH ST APPROACHING CLIFTON AVE.

DRIVER 1 STATED THAT HE WAS IN THE RIGHT LANE AND VEHICLE 2 ENTERED HIS LANE AND STRUCK HIS VEHICLE.

DRIVER 2 STATED THAT HE WAS IN THE LEFT TURN LANE AND ATTEMPTED TO CHANGE LANES. HE STATED THAT HE DID NOT SEE VEHICLE 1 WHEN HE DID SO.

IT APPEARS THAT DRIVER 2 IMPROPERLY CHANGED LANES AND FAILED TO YIELD TO VEHICLE 1 BEFORE DOING SO CAUSING THE CRASH. DRIVER 2 IS AT FAULT.

VEHICLE 2 IS INSURED BY ERIE INSURANCE EXCHANGE 100 ERIE INSURANCE PLACE ERIE, PA 16530 (718)877-4597.

DRIVER 2 WAS ISSUED A SUMMONS FOR UNREGISTERED VEHICLE AND THE VEHICLE WAS LEFT ON PRIVATE PROPERTY.

146 Officer's Signature

RIVERA M

147 Badge #

327

148 Reviewer

PA

Badge #

325

149 Case Status

☐ Pending ☒ Complete

96	PAGE 1 OF 2		Fatal		New Jersey Police Crash Investigation Report										☒ Reportable ☐ Non-Reportable ☐ Change Report																																																													
05	1 Case Number				22-022458										11 Speed Limit		40		118a		25																																																							
97	2 Police Dept of				LAKEWOOD TOWNSHIP F01										10 Crash Occurred On:		MADISON AVE		118b		25																																																							
98	3 Station/Precinct				---										12 Route No.		RT 9		13 Milepost		25																																																							
01	4 Date of Crash				5 Day Of Week		6 Time (use 2400 hrs)		7 Municipality Code		8 Total Killed		9 Total Injured		17 Cross Road Name		18 Speed Limit		25																																																									
02	03/24/22				THURSDAY		1506		1514		--		--		21 Latitude		40.10068		22 Longitude		-74.21832																																																							
100a	23 Veh #				24 Policy No.				25 NJ Ins. Code				53 Veh #				54 Policy No.				55 NJ Ins. Code																																																							
04	1				5082-0173-02				068				2				SELF INSURED				-																																																							
101	☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run												☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp To Emergency ☐ Hit & Run																																																															
02	26 Driver's First Name				Initial				Last Name				29 Sex				56 Driver's First Name				Initial				Last Name																																																			
102	GROSS				-				MEIR SIMCHA				-				M				BEZALEL				-				HAMBURGER				-				M																																							
02	27 Number & Street				4230 SHERIDAN AVE												57 Number & Street				268 RIDGE AVE																																																							
103	28 City				MIAMI BEACH				FL				33140				58 City				LAKEWOOD				NJ				08701																																															
104	30 Eyes				DL Class				Restrictions				Endorsements				31 State				60 Eyes				DL Class				Restrictions				Endorsements				61 State																																							
2	2				-				-				-				FL				6				-				-				IS																																											
105	32 Driver's License Number				G620557974100				33 DOB				mm dd yyyy				34 Expires				mm yy				62 Driver's License Number				200471233				63 DOB				mm dd yyyy				64 Expires				mm yy																															
02	11/10/1997				11				22												05/03/1988				06				22																																															
106	35 Owner's First Name				Initial				Last Name				65 Owner's First Name				Initial				Last Name																																																							
-	☐ Same As Driver				LLC				-				BUGGIES CAR REN -				☐ Same As Driver				-				-				PV HOLDING CORP -																																															
107	36 Number & Street				PO BOX 1168												66 Number & Street				8600 HANGAR BLVD																																																							
108	37 City				JACKSON				NJ				08527				67 City				ORLANDO				FL				32827																																															
109	38 Make				39 Model				40 Color				41 Year				42 Plate No.				43 State				68 Make				69 Model				70 Color				71 Year				72 Plate No.				73 State																															
01	HYUN				ELA				SIL				2019				K66NTX				NJ				HYUN				4DR				GRY				2020				14AUXG				FL																															
110	44 VIN				5NPD84LF3KH469056				45 Expires				08				22				74 VIN				5NPEG4JA0LH028775				75 Expires				06				22																																							
01	46 Vehicle Removed To																76 Vehicle Removed To																																																											
112	☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded																☒ Driven ☐ Towed Disabled ☐ Towed Disabled & Impounded																																																											
-	☐ Left At Scene ☐ Towed Impounded																☐ Left At Scene ☐ Towed Impounded																																																											
113	47 Authority				☐ Owner ☒ Driver ☐ Police								77 Authority				☐ Owner ☒ Driver ☐ Police																																																											
114	48 Alcohol/Drug Test				Given: ☒ No ☐ Yes ☐ Refused				49 Hazardous Material				☒ None ☐ On Board ☐ Spill				78 Alcohol/Drug Test				Given: ☒ No ☐ Yes ☐ Refused				79 Hazardous Material				☒ None ☐ On Board ☐ Spill																																															
115	Type: ☐ Breath ☐ Blood ☐ Urine																Type: ☐ Breath ☐ Blood ☐ Urine																																																											
116	Results: 0. - % ☐ Pending								Hazard Class				Placard No.				Results: 0. - % ☐ Pending								Hazard Class				Placard No.																																															
01	50 Carrier No.				☐ USDOT ☐ MC/MX ☒ None				51 GVWR/GCWR				☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs				80 Carrier No.				☐ USDOT ☐ MC/MX ☒ None				81 GVWR/GCWR				☒ Weight <= 10,000 lbs ☐ Weight 10,001-26,000 lbs ☐ Weight >= 26,001 lbs																																															
117	52 Motor Carrier or Government Entity																82 Motor Carrier or Government Entity																																																											
01	Number & Street																Number & Street																																																											
	City																City																																																											
	State																State																																																											
	Zip																Zip																																																											
	135 Damage To Other Property				☐ Yes (If Yes, describe) ☒ No																																																																							
	Oper.				136 Charge				137 Summons. No.				Oper.				138 Charge				139 Summons. No.																																																							
	Oper.				140 Charge				141 Summons. No.				Oper.				142 Charge				143 Summons. No.																																																							
	83				84				85				86				87				88				89				90				91				92				93				94				95																											
A	1				01				01				05				24				M				-				-				-				11				04				-				-				GROSS				-				MEIR SIMCHA				-											
B	2				01				01				05				33				M				-				-				-				11				04				-				-				4230 SHERIDAN AVE				MIAMI BEACH				FL				33140				-							
C																																																									BEZALEL				-				HAMBURGER				-							
D																																																									268 RIDGE AVE				LAKEWOOD				NJ				08701				-			

New Jersey Police Crash Investigation Report

Police Dept: **LAKEWOOD TOWNSHIP** Code: **01**Station: **--** Case No: **22-022458**

(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A L L I N V O L V E I D J	83	84	85	86	87	88	89	90	91	92	93	94	95	

144 Crash Diagram (NOT TO SCALE)



MADISON AVENUE

Unit 2

Unit 1

145 Crash Description/Narrative

DRIVER #1 STATED THAT HE WAS TRAVELING NORTH ON MADISON AVENUE IN THE RIGHT LANE, WHEN VEHICLE #2 ALSO TRAVELING NORTH IN THE LEFT LANE ATTEMPTED TO MERGE INTO THE RIGHT LANE CAUSING BOTH VEHICLES TO COLLIDE. DRIVER #2 STATED THAT HE WAS TRAVELING NORTH ON MADISON AVENUE IN THE LEFT LANE AND ATTEMPTED TO MERGE INTO THE RIGHT LANE COLLIDING WITH VEHICLE #1 WHICH WAS IN THE RIGHT LANE. NO INJURIES REPORTED.

**--VEHICLE #2 INSURANCE INFO: AVIS RENTAL
1201 HAYS STREET
TALLAHASSEE, FL 32301
#718-244-5400**

146 Officer's Signature

RIVERA F

147 Badge #

294

148 Reviewer

JP

Badge #

283

149 Case Status

☐ Pending ☒ Complete